

SB 830 - Limited Radiologic Technicians-Delasobera

Uploaded by: Bronson Elizabeth Delasobera, M.D.

Position: FAV



MedStar Health

B. Elizabeth Delasobera, MD
Vice President and Chief Medical Officer
MedStar Ambulatory Services

Medical Director
Primary Care Sports Medicine (DC Region)

Bronson.e.delasobera@medstar.net

**SB 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology
Assistance - Limited Licensed Radiologic Technologist**

Position: *Support*

February 27, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 E Miller Senate Office Building
11 Bladen Street
Annapolis MD 21401

Dear Chair Beidle:

I am writing to express my strong support for SB 830, which addresses the role of Limited Licensed Radiologic Technologists (LRTs) in radiation therapy, radiography, nuclear medicine technology, and radiology assistance. As a healthcare provider deeply invested in the efficient delivery of care, particularly in urgent care settings, I believe that this legislation is critical for improving patient outcomes and streamlining healthcare services in Maryland.

Urgent care facilities play a crucial role in relieving the burden on emergency departments (EDs) by managing non-life-threatening conditions promptly and efficiently. At MedStar Urgent Care alone, we serve nearly 600,000 patients annually, with less than 5 percent of these individuals requiring ED-level care based on the severity of their injury or illness. However, approximately 16 percent of our urgent care patients necessitate X-ray imaging, accounting for approximately 100,000 exams per year.

Despite the significant demand for X-ray services in urgent care, staffing challenges often result in up to 10 out of our 33 sites operating without X-ray capabilities on any given day. This deficiency poses a considerable risk, as patients who rely on urgent care for timely X-ray evaluations may be compelled to seek care in overcrowded EDs, exacerbating wait times and placing a strain on hospital resources.

By implementing the Limited Licensed Radiologic Technologist program in urgent care settings, we can address this critical gap in healthcare delivery. Training medical assistants (MAs) to become LRTs enables us to optimize staffing resources, allowing fully trained Radiologic Technologists (RTs) to focus on more complex imaging studies in hospital settings.

Having worked extensively in sports medicine, urgent care, and emergency medicine, I am confident that MAs trained as limited RTs possess the skills and competence to perform the majority of X-ray examinations required in urgent care settings. Moreover, shifting RTs to hospital settings not only improves access to X-ray services but also facilitates future career growth opportunities, including multi-modality training in CT and MRI technologies.

The Honorable Pamela Beidle
SB 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance -
Limited Licensed Radiologic Technologist
Position: *Support*
February 27, 2024

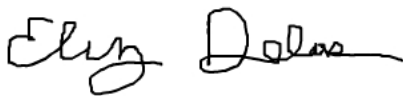
Page 2

Furthermore, increasing the availability of RTs in hospital settings can significantly reduce turnaround times for X-ray completion, enhancing ED throughput and patient flow. Currently, the average turnaround time for X-rays in MedStar Maryland EDs stands at approximately 30 minutes. By filling vacant Rad Tech positions in hospitals, we can expedite this process, leading to more efficient care delivery and shorter ED door-to-door times.

In conclusion, SB 830 represents a proactive step toward optimizing healthcare resources and improving patient care outcomes in Maryland. By empowering urgent care facilities with the flexibility to utilize Limited Licensed Radiologic Technologists, we can alleviate strain on EDs, enhance access to X-ray services, and promote career advancement opportunities for healthcare professionals.

Thank you for considering my testimony in **support** of SB 830. I urge you to prioritize the passage of this legislation for the benefit of patients and healthcare providers across the state.

Sincerely,

A handwritten signature in black ink, appearing to read "Elizabeth Delasobera". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Bronson Elizabeth Delasobera, MD
Vice President & Chief Medical Officer
MedStar Ambulatory Services

cc: Members, Senate Finance Committee
David Smulski, staff

SB 830- Radiation Therapy, Radiography- Support .p

Uploaded by: Jane Krienke

Position: FAV



Maryland
Hospital Association

**Senate Bill 830- Radiation Therapy, Radiography, Nuclear Medicine Technology, and
Radiology Assistance - Limited Licensed Radiologic Technologist**

Position: *Support with the Sponsor's Amendments*

February 27, 2024

Senate Finance Committee

MHA Position

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 830 with the Sponsor's amendments.

During the 2023 interim, Maryland hospitals worked together to discuss and recommend solutions to address hospital throughput and emergency department length of stay. Many of the solutions involve engagement with external stakeholders to ensure there is capacity in the community to meet lower acuity health needs.

SB 830, as amended, would create a licensure exception to allow individuals who receive specified training, to perform limited X-rays of the chest, extremities, and spine under supervision in physician offices, urgent care centers, and freestanding medical facilities. This solution is beneficial on multiple fronts.

This change would expand access to care. In Q4 2023, Maryland hospitals reported a 12.6% vacancy rate for radiologic technologists (RT). These specially trained health care workers are critical in hospital environments where they can perform specific radiologic procedures on high acuity patients. Currently, RTs are utilized in hospitals and outpatient settings. Given the shortage, this means there are outpatient settings, like urgent care centers, where there is no access to X-ray services. Medical assistants, however, are already employed in many of these outpatient settings. If they could receive additional training to perform X-rays on low acuity patients, this would preserve access in the community and reduce emergency department referrals.

SB 830 also would also create a career steppingstone for some health care professionals, such as medical assistants, and provide leadership opportunities for RTs interested in teaching the limited scope training or supervising a limited scope X-ray machine operator. Unfortunately, RT school is not accessible for everyone who would like to pursue this career. The training takes two years of full-time school and can be expensive. Offering a limited scope licensure exception can allow interested individuals to earn an income while gaining experience. For those who want to pursue higher education, there is a career path via RT school. For those who are content to work in this field, they would be filling a critical health care workforce need.

Thirty four other states offer this path whether through a licensure process, registration, permit or licensure exception. The limited scope path has not resulted in adverse outcomes or concerns from other states. Neighboring states like Virginia and Delaware are more attractive to medical assistants and threaten to pull parts of our workforce across the border. We need to maintain a competitive advantage and offer a similar pathway.

With the proposed amendments, the Board of Physicians would be able to monitor limited scope X-ray machine operators and hold health care facilities accountable for ensuring all training and supervisory requirements are met. The Board took a similar approach when creating a licensure exception for registered cardiovascular invasive specialists. The Maryland Health Care Commission report released last year showed no adverse outcomes. A similar process will help the Board better understand this workforce and whether it would be beneficial to offer a license for limited scope X-ray duties.

Maryland hospitals need relief and support to ensure access to care for their communities. SB 830 offers an immediate solution that has been shown to be effective in other states.

For all these reasons, we ask for a *favorable* report on SB 830, with the Sponsor's amendments.

For more information, please contact:
Jane Krienke, Senior Legislative Analyst, Government Affairs
Jkrienke@mhaonline.org

SB830-Radiation Therapy Radiography Nuclear Medici

Uploaded by: Jennifer Witten

Position: FAV



Date: February 27, 2024

To: Chair Beidle and Finance Committee Members

Reference: SB830-Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Position: Support with sponsor amendments

Dear Chair, Beidle and Committee Members,

On behalf of LifeBridge Health, we appreciate the opportunity to provide information and support for Senate Bill-830. LifeBridge Health is a regional health system comprising Sinai Hospital of Baltimore, an independent academic medical center; Levindale Hebrew Geriatric Center and Hospital in Baltimore; Northwest Hospital, a community hospital in Baltimore County; Carroll Hospital, a sole community hospital in Carroll County; Grace Medical Center (formerly Bon Secours Hospital), a freestanding medical facility in West Baltimore. In addition to our hospitals, *LifeBridge Partners has over 30 Urgent Care Centers across the state treating over 500,000 patients a year.* Express Care offers medical treatment for common illnesses and injuries, flu shots, work-related injury services and can provide primary care as needed. These centers are hubs for communities needing non-urgent care 24/7.

The committee has discussed issues of ongoing healthcare workforce shortages and hospital overcrowding over the last couple of legislative sessions. The Maryland Hospital Association brought members together to identify solutions to address hospital throughput and emergency department length of stay. Several solutions identified focused on the need to ensure we maintain and expand community access to healthcare services where individuals can obtain those services especially before a situation becomes an emergency.

Unfortunately, due to ongoing shortages in the allied health professional like radiological technicians, healthcare facilities like Urgent Care Centers are finding it harder to maintain staffing to provide the full complement of diagnostic tests onsite in particular x-rays. If a physician needs basic imaging and there is no rad tech, they must refer patients back to a hospital for a non-urgent test that results in hours of waiting, increased patient frustration, while adding to the existing crowding issue. This is a disservice to the patients we serve across the state that trust we can provide imaging and prescribe needed therapy there onsite. One solution to this problem is to allow a limited exemption for other competent staff to train to assist with basic imaging needs.

Senate Bill-830, as amended, would create a licensure exception to allow individuals who receive specified training, to perform limited X-rays of the chest, extremities, and spine under supervision in physician offices, urgent care centers, and freestanding medical facilities. This solution is beneficial on multiple fronts.

CARE BRAVELY

This change would expand access to care. LifeBridge Health experienced over a 53% vacancy rate for radiologic technologists (RT). These specially trained health care workers are critical in hospital environments where they can perform specific radiologic procedures on high acuity patients. Currently, RTs are utilized in hospitals and outpatient settings.

SB-830 creates a career development pathway for some health care professionals, such as medical assistants, and provides leadership opportunities for RTs interested in teaching the limited scope training or supervising a limited scope X-ray machine operator. Unfortunately, RT school is not accessible for everyone who would like to pursue this career. The training takes two years of full-time school and can be expensive. Offering a limited scope licensure exception can allow interested individuals to earn an income while gaining experience. For those who want to pursue higher education, there is a career path via RT school. For those who are content to work in this field, they would be filling a critical health care workforce need.

Maryland would not be a trailblazer in taking this step. Currently, **thirty-four other states** offer this path whether through a licensure process, registration, permit or licensure exception. The limited scope path has not resulted in adverse outcomes or concerns from other states. Neighboring states like Virginia and Delaware are more attractive to medical assistants and threaten to pull parts of our workforce across the border. We need to maintain a competitive advantage and offer a similar pathway.

With the proposed amendments, the Board of Physicians would be able to monitor limited scope X-ray machine operators and hold health care facilities accountable for ensuring all training and supervisory requirements are met. The Board took a similar approach when creating a licensure exception for registered cardiovascular invasive specialists. The Maryland Health Care Commission report released last year showed no adverse outcomes. A similar process will help the Board better understand this workforce and whether it would be beneficial to offer a license for limited scope X-ray duties.

Lastly, this measure would not jeopardize patient safety, our medical providers come to work every day with the goal in supporting patients living the healthy life possible. If we are not nimble in finding solutions, we are doing more of a disservice by limiting access and identifying early interventions as appropriate.

For all the above stated reasons, we request a favorable report with the adoption of sponsor amendments.

For more information, please contact:

Jennifer Witten, M.B.A.

Vice President, Government Relations & Community Development

jwitten2@lifebridgedhealth.org

Mobile: 505-688-3495

SB 830_Limited Scope Xray_Dr Scott Burger_Support.

Uploaded by: Scott Burger

Position: FAV

**SB 830- Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology
Assistance - Limited Licensed Radiologic Technologist**

February 27, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 E Miller Senate Office Building
11 Bladen Street
Annapolis MD 21401

Position: *Support*

Dear Chair Beidle:

My name is Dr. Scott Burger. I am the Chief Medical Officer for University of Maryland Urgent Care. I am an emergency medicine physician and have been operating urgent care clinics since 2006. I am writing you to express my strong support for SB 830.

My motivation for leaving the emergency department and starting urgent care clinics was to find a better way to care for the patients that were presenting to my emergency departments with non-emergency issues. These patients invariably waited the longest and were still left with large bills for their care.

Urgent care has grown exponentially in the time I have been involved in the industry. Urgent care clinics have always offered x-ray. Our patients have come to rely on us to care for them when they are worried they may have broken a bone, pneumonia, or other condition requiring an x-ray. Up until the pandemic, urgent care could consistently deliver on that promise.

The pandemic ushered in a wave of retirements and people leaving frontline positions or the field of healthcare altogether. This wave included our staff of Radiologic Technologists (RT). The shortage of RTs is so significant that urgent care centers across the State are often forced to staff without a single RT on any given shift. It is not uncommon for only half of the 10 urgent care centers I oversee, to be staffed with an RT.

X-ray imaging is one of the most basic functions performed by an RT and the absence of these providers compromises our patients' access to care. Instead of being able to immediately confirm or diagnose an injury or illness, urgent care centers must refer patients to already over-crowded emergency departments or attempt to coordinate patient care with outpatient imaging facilities that have limited hours of operation – resulting in significant delay in diagnoses/treatment, ongoing discomfort, and additional expense for patients.



I am confident that Medical Assistants (MAs), with appropriate training and oversight, can safely perform the x-rays needed in urgent care settings. Not only will this improve access to care for my patients, it will also help free up RTs to work in hospitals and other facilities where their training and expertise can be used at full scope.

SB 830 represents a necessary evolution of healthcare. It builds upon what is already being done in 34 states and the District of Columbia. It is not a new or novel concept, just the recognition of the changing landscape of healthcare and how with advancing technology, others can be trained for jobs that they would not have been able to perform in the past.

For all of these reasons, I urge a favorable report. Thank you for your time and consideration of my testimony in support of SB 830.

Respectfully,

Scott T Burger, DO

Scott Burger, DO

Chief Medical Officer

University of Maryland Urgent Care

SB 830 - Limited Radiologic Technicians-Kaldis Ltr

Uploaded by: Stephanie Kaldis

Position: FAV



**SB 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology
Assistance - Limited Licensed Radiologic Technologist
Position: *Support***

February 27, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 E Miller Senate Office Building
11 Bladen Street
Annapolis MD 21401

Dear Chair Beidle:

I am writing to offer my strong support for the legislation under consideration that aims to recognize and regulate the role of Limited Radiology Technologists (LRTs) in the District of Columbia and Virginia. As a representative of MedStar Health Urgent Care, I have witnessed firsthand the invaluable contributions of LRTs to our healthcare system over the past two and a half years.

MedStar Health Urgent Care has been at the forefront of training and integrating LRTs into our healthcare team, both in the District of Columbia and in Virginia. Our rigorous training program, spanning over two and a half years, has equipped multiple LRTs with the skills and knowledge necessary to perform diagnostic imaging procedures effectively and safely.

One of the key aspects of our LRT program is the close supervision and monitoring provided by our senior technologists and radiology managers. Additionally, our radiologists meticulously evaluate the images produced by LRTs as part of a comprehensive quality assurance program. The results speak for themselves—our LRTs consistently demonstrate high-performance levels comparable to our fully trained Radiology Technologists (RTs).

The educational foundation of our LRT program is robust and comprehensive. LRTs undergo 170 clinical hours under the supervision of certified American Registry of Radiologic Technologists (ARRT) technologists, coupled with a minimum of 115 didactic hours delivered by licensed ARRT-certified RTs holding at least a bachelor's degree. This ensures that LRTs receive thorough instruction and practical experience to excel in their roles.

Since the inception of our LRT program, our dedicated team of LRTs has filled over 240 shifts and completed more than 2,200 diagnostic exams, focusing primarily on the chest, spine, and extremities. Their proficiency and dedication have been instrumental in enhancing the efficiency and effectiveness of our urgent care services.

Moreover, the LRT program serves as an accessible pathway for Medical Assistants (MAs) to pursue a rewarding career in radiology while working in the urgent care setting. For many of our low-income employees, the LRT program has been a steppingstone toward further education and career

-more-

The Honorable Pamela Beidle

February 27, 2024

SB 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology
Assistance - Limited Licensed Radiologic Technologist

Position: **Support**

Page 2

development. Half of our LRTs have utilized this opportunity to advance to a full two-year RT program, illustrating the transformative impact of this initiative on their professional growth and trajectory.

In conclusion, the legislation to formally recognize and regulate LRTs is a crucial step toward promoting quality healthcare delivery and fostering career advancement opportunities for healthcare professionals. I urge you to support this legislation, which not only recognizes the valuable contributions of LRTs but also ensures the continued provision of high-quality care to our communities.

Thank you for considering my testimony and I urge a **favorable** vote on this legislation. Should you need additional information, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Skaldis". The signature is written in a cursive, flowing style.

Stephanie Kaldis

Regulatory Manager Radiology Compliance with MedStar Health Urgent Care

cc: Members, Senate Finance Committee
David Smulski, staff

SB 830 - Limited Radiologic Technicians - Brick Lt

Uploaded by: Steven H. Brick, M.D.

Position: FAV



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MedStar Medical Group Radiology

Steven H. Brick, MD, FACR
Physician Executive Director

SB 830 – Radiation Therapy, Nuclear Medicine Technology, and Radiology
Assistance – Limited Radiologic Technologist
Position: *Support*

February 27, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 E Miller Senate Office Building
11 Bladen Street
Annapolis MD 21401

Dear Chair Beidle:

Good afternoon, Chair Beidle, and esteemed members of the Committee. My name is Steven Brick, and I am honored to submit written testimony to you today as a radiologist at MedStar Health. I am here to offer my testimony in wholehearted support of SB 830.

As background, I was Board Certified in Diagnostic Radiology in 1987. For the past 10 years, I have overseen all aspects of Radiology at MedStar Health, including leadership of the professional Radiology practice.

With over three decades of experience, including ten years overseeing Radiology at MedStar Health, I bring a wealth of insight into the matters at hand. Today, I wish to direct your attention to two pivotal aspects of SB 830: the quality of work conducted by limited RTs and the paramount concern of radiation safety.

Quality is the cornerstone of our profession, and it is with great pride that I affirm the exceptional standard upheld by our limited RTs (LRTs). For the past three years, MedStar Health has entrusted LRTs with responsibilities at our Urgent Care sites in DC and VA. Throughout this period, not a single complaint has surfaced regarding the quality of their work. Our radiologists maintain a vigilant eye, swiftly offering feedback on every imaging case. This feedback loop, integral to our commitment to excellence, ensures both commendations for exemplary work and guidance for areas necessitating improvement. Importantly, this process extends to X-rays performed by LRTs, with no disparity observed in the feedback provided compared to that for fully certified RTs.

Turning to the critical matter of radiation safety, I must emphasize the gravity of the risks inherent in X-ray procedures. Patients are vulnerable to potential harm arising from incorrect exposure settings or the need for repeated images due to positioning errors. However, I reassure you that MedStar Health has implemented robust measures to mitigate these risks. Our LRTs undergo rigorous training, with a

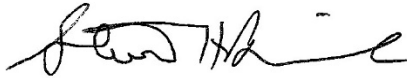
The Honorable Pamela Beidle
SB 830 – Radiation Therapy, Nuclear Medicine Technology, and Radiology
Assistance – Limited Radiologica Technologist
Position: **Support**
February 27, 2024

Page 2

particular emphasis on exposure settings, closely supervised by senior RTs during clinical training. Furthermore, our XR equipment is equipped with stringent controls to limit over-exposure, bolstering patient safety. Through meticulous monitoring and feedback mechanisms, we have found no discernible difference between the performance of LRTs and fully certified RTs in minimizing the need for repeat images.

In conclusion, I urge the Committee to lend their **support** to SB 830. With the assurance of quality upheld by our LRTs and our unwavering commitment to radiation safety, this bill represents a significant stride forward for patient care. Thank you for your attention and consideration.

Yours truly,

A handwritten signature in black ink, appearing to read "Steven H. Brick". The signature is fluid and cursive, with a horizontal line extending to the right.

Steven H. Brick, MD, FACR
Physician Executive Director
MedStar Medical Group Radiology

cc: Members, Senate Finance Committee
David Smulski, Staff

Jesus Martinez- Written Testimony-HB 830.pdf

Uploaded by: Jim McGreevy

Position: FWA

February 26, 2024

Madam Chair & Members of the Finance Committee,

Madam Chair and Committee,

My name is Jesus Martinez. I am the Lead Radiologic Technologist for Concentra Urgent Care center in Santa Ana California. I started as an X-Ray Technician 15 years ago in 2009. I then became a Radiologic Technologist in 2018.

Prior to going into this field, I did not have any experience in the medical field. Being an X-ray Technologist has been very beneficial to me helping build my interpersonal relations as you get to meet with so many people from different backgrounds. I have learned to build empathy for patients, and it has also helped me build confidence, especially in my communication skills.

Pursuing Limited Scope X-ray gave me a great foundation, as it allowed me to get hands on experience to do x-rays on patients that had different medical conditions such as Osteoporosis, Arthritis, or different types of fractures.

Being a Limited Scope X-ray Technician helped me realize I wanted to further my knowledge in this field. About 7 years after, I decided to go back to school and become a full registered Radiologic Technologist. My knowledge as a limited scope x-ray technician helped me be prepared for the challenge that the Radiology program brought as well as it helped me be better prepared for the ARRT exam.

As a full tech I then realized my job opportunities increased as I am allowed to do so much more within my scope, for example, getting to be certified in Fluoroscopy, CT or MRI. You can also take the route of being in education or health administration. But it all starts from taking that first step and becoming a Limited Scope X-ray Technician.

I hope that there is a favorable report on Senate Bill 830 and that Maryland healthcare professionals, such as Medical Assistants be given the opportunity to learn Limited Scope Radiography.

Jesus Martinez, (RT)R

Lead Radiologic Technologist

Concentra- Santa Ana Tustin

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800 N. Tustin Ave, Suite A

Santa Ana, CA 92705

Concentra.com

SB830 Sponsor Amendment.pdf

Uploaded by: Katherine Klausmeier

Position: FWA



SB0830/963026/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

26 FEB 24
16:44:10

BY: Senator Klausmeier
(To be offered in the Finance Committee)

AMENDMENTS TO SENATE BILL 830
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike in their entirety lines 2 and 3 and substitute “**State Board of Physicians – Performance of X-Ray Duties Without a License**”; strike beginning with “establishing” in line 4 down through “Committee;” in line 8 and substitute “altering the circumstances under which individuals without a license to practice medicine may perform X-ray duties;”; strike beginning with “limited” in line 8 down through “technologists” in line 9 and substitute “the performance of X-ray duties by individuals without a license”; in line 12, after “Section” insert “14-306(e)”; strike beginning with “14-206(e)(2)(iii)” in line 12 down through “Technology” in line 16; after line 18, insert:

“BY adding to
Article – Health Occupations
Section 14-306(g) and (h)
Annotated Code of Maryland
(2021 Replacement Volume and 2023 Supplement)”;

and strike in their entirety lines 19 through 28, inclusive.

AMENDMENT NO. 2

On page 2, after line 3, insert:

“14-306.

(e) Except as otherwise provided in this section AND IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE BOARD, an individual may perform X-ray duties without a license only if the duties:

(1) Do not include:

(i) Computerized or noncomputerized tomography;

- (ii) Fluoroscopy;
- (iii) Invasive radiology;
- (iv) Mammography;
- (v) Nuclear medicine;
- (vi) Radiation therapy; or
- (vii) Xerography;

(2) Are limited to X-ray procedures of the:

- (i) Chest[, anterior-posterior and lateral];
- (ii) Spine[, anterior-posterior and lateral; or], INCLUDING THE:

1. CERVICAL SPINE;
2. LUMBAR SPINE;
3. SACROILIAC JOINTS;
4. SACRUM AND COCCYX; AND
5. THORACIC SPINE;

(iii) [Extremities, anterior-posterior and lateral, not including the head; and] LOWER EXTREMITIES, INCLUDING:

1. TOES;
2. THE FOOT;
3. THE ANKLE;

4. THE CALCANEUS;
5. THE TIBIA AND FIBULA;
6. THE KNEE AND PATELLA; AND
7. THE FEMUR; AND

(IV) UPPER EXTREMITIES, INCLUDING:

1. FINGERS;
2. THE HAND;
3. THE WRIST;
4. THE FOREARM;
5. THE ELBOW;
6. THE HUMERUS;
7. THE SHOULDER;
8. THE CLAVICLE;
9. ACROMIOCLAVICULAR JOINTS; AND
10. THE SCAPULA; AND

(3) Are performed:

- (i) [By an individual who is not employed primarily to perform

X-ray duties;

(Over)

(ii) 1. In the medical office of the physician who delegates the duties; [and] OR

2. IN A FREESTANDING MEDICAL FACILITY, AS DEFINED IN § 19-3A-01 OF THE HEALTH – GENERAL ARTICLE, UNDER THE SUPERVISION OF A LICENSED PHYSICIAN OR RADIOLOGIC TECHNOLOGIST WHO IS ON-SITE OR ABLE TO PROVIDE IMMEDIATELY AVAILABLE DIRECTION; AND

[(iii)] (II) 1. By an individual who[, before October 1, 2002,]
has:

A. [Taken a course consisting of at least 30 hours of training in performing X-ray procedures approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; and

B. Successfully passed an examination based on that course that has been approved by the Maryland Radiological Society in consultation with the Maryland Society of Radiologic Technologists; or] COMPLETED A LIMITED SCOPE X-RAY EDUCATIONAL PROGRAM CONSISTING OF AT LEAST 115 HOURS OF DIDACTIC TRAINING DELIVERED BY A RADIOLOGIC TECHNOLOGIST CERTIFIED BY THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS PROVIDING INSTRUCTION IN RADIOGRAPHIC ANATOMY, PROCEDURES, AND PATHOLOGY, DIGITAL IMAGE ACQUISITION AND DISPLAY, FUNDAMENTALS, ETHICS, AND LAWS OF HEALTH CARE, HUMAN ANATOMY AND PHYSIOLOGY, IMAGE PRODUCTION AND ANALYSIS, IMAGING EQUIPMENT AND RADIATION PRODUCTION, MEDICAL TERMINOLOGY, AND PATIENT CARE;

B. COMPLETED AT LEAST 480 HOURS OF CLINICAL TRAINING AND SUCCESSFULLY COMPLETED A MINIMUM OF FIVE COMPETENCIES IN EACH BODY PART LISTED IN ITEM (2) OF THIS SUBSECTION UNDER THE DIRECT SUPERVISION OF A RADIOLOGIC TECHNOLOGIST CERTIFIED BY THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS;

C. ACHIEVED A PASSING SCORE, AS DETERMINED BY THE BOARD, ON THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS

EXAMINATION FOR LIMITED SCOPE OF PRACTICE IN RADIOGRAPHY OR AN ALTERNATIVE EXAMINATION APPROVED BY THE BOARD; AND

D. REGISTERED WITH THE BOARD ATTESTING TO THE COMPLETION OF THE REQUIREMENTS OF THIS ITEM; OR

2. By a licensed physician assistant who has completed a course that includes anterior–posterior and lateral radiographic studies of extremities on at least 20 separate patients under the direct supervision of the delegating physician or radiologist using a mini C–arm or similar low–level radiation machine to perform nonfluoroscopic X–ray procedures, if the duties:

A. Include only the X–ray procedures described in paragraph (2)(iii) of this subsection; and

B. Are performed pursuant to a Board–approved delegation agreement that includes a request to perform advanced duties under § 15–302(c)(2) of this article.

(G) IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE BOARD, A HEALTH CARE FACILITY THAT EMPLOYS AN INDIVIDUAL AUTHORIZED TO PERFORM X–RAY DUTIES WITHOUT A LICENSE UNDER SUBSECTION (E) OF THIS SECTION IS RESPONSIBLE FOR ENSURING THAT ALL REQUIREMENTS OF SUBSECTION (E) OF THIS SECTION ARE MET FOR EACH X–RAY EXAMINATION PERFORMED.

(H) IF AN UNLICENSED INDIVIDUAL PERFORMS X–RAY DUTIES WITHOUT MEETING THE REQUIREMENTS OF SUBSECTION (E) OF THIS SECTION, THE BOARD MAY IMPOSE A CIVIL PENALTY OF UP TO \$5,000 FOR EACH VIOLATION ON THE MEDICAL OFFICE OF THE PHYSICIAN OR THE HEALTH CARE FACILITY WHERE THE VIOLATION OCCURRED.”.

On pages 2 through 17, strike in their entirety the lines beginning with line 4 on page 2 through line 12 on page 17, inclusive, and substitute:

“SECTION 2. AND BE IT FURTHER ENACTED, That, on or before October 1, 2028, the State Board of Physicians shall report to the Senate Finance Committee and

(Over)

the House Health and Government Operations Committee, in accordance with § 2-1257 of the State Government Article, on:

(1) the number of individuals who have registered with the Board to perform limited X-ray duties under § 14-306(e) of the Health Occupations Article, as enacted by Section 1 of this Act; and

(2) its recommendations regarding the continuation of the registration process or the replacement of the registration process with a limited licensure category.”;

and in line 13, strike “2.” and substitute “3.”.

Jean Johnson- Written Testimony-HB 830.pdf

Uploaded by: Kim Mayhew

Position: FWA

February 23, 2024

Madam Chair and Committee,

My name is Jean Johnson and I am the Northeast Regional Radiology Manager for Concentra. I have been a Registered Radiologic Technologist, RT(R) for 14 years. I would like to provide my support for the implementation of limited scope xray technicians in the state of Maryland. Concentra is America's largest and leading occupational health care provider. We also offer urgent care at most locations.

Concentra, along with many other hospitals and facilities, is currently facing a nationwide shortage of Radiologic Technologists. For Concentra, in the state of Maryland, this has resulted in some of our 13 clinics with no xray staff. We have had an ongoing issue with staffing our clinics in the state.

Currently, if there is not a radiologic technologist available in our clinics, patients are often sent to other facilities for x-rays. These can include the ER or outpatient imaging centers. The cost for x-ray services in the ER and outpatient imaging centers are far greater than those the patient would incur in the urgent care setting.

34 states currently have a pathway towards limited scope xray technicians. Limited radiographers are most useful in private practice, urgent care, or occupational medical care. In all these settings, the expanded skillset associated with a Radiologic Technologist is not fully utilized. This is because, typically in our occupational medicine/urgent care model, our xray exams mostly consist of extremity, chest, and spine radiographs and at lower volume than at a hospital. Given underutilization of the skillset, many Radiologic Technologists tend to not stay long term in these types of environments.

Maryland accepting a pathway for individuals to acquire limited scope xray training would be beneficial in so many ways. This could provide medical staff, such as medical assistants, with an introduction to radiologic technology and a way to enhance their professional growth. Ambulatory care settings in the state will benefit from the creation of this opportunity to address the need for limited scope xray technicians to fill the many open positions in our healthcare workforce. I request a favorable report on Senate Bill 830.

Thank you for your consideration,

Jean Johnson, RT(R)

Jean Johnson, RT(R)
Regional Radiology Manager- Northeast Region

Concentra
207-232-7869 (M)
400 Southborough Drive
South Portland, ME 04106

GR24_MD_SB830_LXMO_Letterhead.pdf

Uploaded by: Meredith Check

Position: FWA



American Society of Radiologic Technologists

Senator Pamela Beidle
Chair
Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, Maryland 21401

Re: SB 830- Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

February 26, 2024

Dear Chair Beidle,

The American Society of Radiologic Technologists represents more than 156,000 medical imaging technologists and radiation therapists across the nation, including 2,630 in Maryland. Our main mission as an organization is to advance and elevate the medical imaging and radiation therapy profession and to enhance the quality and safety of patient care.

Any program of standards for a limited x-ray machine operator (LXMO), whether that is registration or licensure, must include specific elements to ensure only those who have been appropriately educated and trained are performing medical-imaging procedures under the direct supervision of the appropriate healthcare provider. Any performance standard law must include the following.

Recommendation 1, Supervision: Supervision of LXMOs must only be either licensed physician or a full scope licensed radiologic technologist.

Reasoning 1: Advance Practice Nurses and Physician Assistants do not receive the necessary specialized training in radiation safety, radiobiology, radiation physics, patient positioning, or procedure correction to supervise a LXMO. Often, APRNs and PAs have similar training and experience to LXMO in these specialized areas, negating their capability to clinically supervise. Only licensed physicians and full scope radiologic technologists who have achieved nationally recognized credentials have the advanced knowledge of processes and procedures required for clinical supervision.

Recommendation 2, Continuing Education: All limited x-ray machine operators must complete at least 12 hours of continuing education units in areas specific to radiation safety, and the specific areas of anatomy LXMOs perform procedures.

Reasoning 2: Like every profession, medical imaging technology and best practices change over time. It is critical that all healthcare workers performing any kind of medical imaging continue their education to stay current on patient safety practices and evolving technologies. Full scope technologists are required to complete at least 24 hours of continuing education every 2 years; therefore, it is the recommendation of ASRT that LXMOs complete at least 12 hours of imaging-specific continuing education every 2 years.

Recommendation 3, Initial Education: While it is understandable that LXMOs do not complete the full initial education that a radiologic technologist is required to complete, it is critical that individuals wishing to become limited x-ray machine operators complete formal education directed by a full scope radiologic technologist or a radiologist. Areas of education must include at least 25 hours of image production and equipment operation, at least 15 hours of radiation protection, and at least 10 hours of radiographic procedures in the anatomical area.

Reasoning 3: Performance of medical imaging without baseline knowledge puts patients and healthcare providers at high risk of being overexposed to radiation. While ASRT encourages more initial education, the minimum education hours currently listed in SB 830 are on par with states with similar LXMO laws. Formal education taught by instructors who specialize in medical imaging ensures a level of consistency in quality of care that is critical in a functioning healthcare system. ASRT offers curriculum guidelines for LXMO, and ASRT highly recommends the state utilize these content specs in forming education requirements¹

Recommendation 4, Competency Exam: Any final law passed to allow for the creation of limited scope technologists must include the ARRT LXMO exam administered by the state.

Reasoning 4: The American Registry of Radiologic Technologists (ARRT) is a nationally recognized credentialing organization for medical imaging and radiation therapy, which administers credentialing examinations for radiologic technologists. The exams they have made available to states for LXMOs are created and reviewed by subject matter experts and ensure that LXMOs working in the state can prove necessary competency. Without a competency exam, there is no guarantee that every individual training to be a LXMO hold equal skill. Additionally, successfully passing a competency exam allows LXMOs to freely move between facilities without having to retrain or the new facility taking the risk of inadequate training.

Recommendation 5: Because the state of Maryland already license full scope radiologic technologists, ASRT recommends that any statute creating standards for LXMO fall under the same section as the other radiologic technologists rather than for this statute to be under the physician delegating section (14-306).

Reasoning 5: Limited X-ray Machine Operators are part of the medical imaging and radiation therapy profession. For the sake of clarity and consistent statute, LXMOs should live in the same section of statute as the rest of the medical imaging profession. As workers move into the state, it is important that these statutes are understandable. By hiding LXMO under physician delegation, it will create confusion on what is acceptable by law. The common person looks to the section on radiologic technologists for the full breadth of the profession, including LXMO.

Creating consistent standards across all health care facilities is the only way to ensure all patients are receiving the highest quality care and ensure that workers are able to successfully move between health care facilities as they as individuals deem appropriate. Entities that are opposed to initial education standards and the requirement of a competency exam are advocating to allow facilities to determine what is the appropriate education and competency exams. As the state is battling workforce shortages, these recommended standards guarantee that employees are not chained to the facility where they received their training, but have proven competency on a nationally created test, and can move within

¹ Limited X-Ray Machine Operator Curriculum. ASRT Limited X-Ray Machine Operator Curriculum. Accessed February 26, 2024. <https://www.asrt.org/educators/asrt-curricula/lxmo/lxmo-curriculum>.

the state without fear of being unemployable. These recommended standards ensure employability while maintaining the highest quality patient care possible.

ASRT appreciates your commitment to providing patients' access to quality health care services that only individuals that meet national education and clinical standards can provide and looks forward to working with you in the future to achieve this goal. The ASRT firmly recommends that the scope of practice for radiologic technologists in Maryland is not encroached upon to ensure patient safety and high-quality imaging is performed. Please feel free to contact me at mcheck@asrt.org or 800-444-2778; Ext 1314 if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "M Check". The signature is written in a cursive, flowing style.

Meredith A. Check, MPP
Manager of Government Relations and Public Policy
American Society of Radiologic Technologists

John Hovlid- Written Testimony-HB 830.pdf

Uploaded by: Perry White

Position: FWA

February 23, 2024

Madam Chair and Committee,

My name is John Hovlid. I am the Midwest Regional Radiology Manager for Concentra. I have been a licensed Limited Scope X-ray Technician in the state of Illinois for 20 years. I originally completed a Limited Scope Radiology program through the US Navy.

Having a limited scope x-ray license can be a great pathway to furthering your career because it provides you with practical experience in the field of Radiology, which can be valuable when pursuing additional certifications like the American Registry of Radiologic Technologists (ARRT) license. A limited scope x-ray license equips you with essential skills in conducting x-ray procedures and interacting with patients in a clinical setting.

The hands-on experience is invaluable for building a strong foundational understanding of radiography techniques and patient care. By honing your technical skills and patient care abilities through your limited scope x-ray license, you are better prepared to take on the challenges of obtaining an ARRT license.

Transitioning from a limited scope x-ray license to obtaining an American Registry of Radiologic Technologists (ARRT) license is a strategic move for advancing your career in the field of radiologic technology, making it an ideal steppingstone towards pursuing an ARRT license.

I have had my limited scope x-ray license for over 20 years and the hands-on experience and knowledge I have gained over the years from having a limited scope x-ray license has helped me understand the field better, provide better patient care, and made it easier to transition into a more advanced role by going back to school to pursue my degree in radiology and obtaining my ARRT certification, which I will complete this summer. Maryland healthcare professionals, such as Medical Assistants, should be given the opportunity to learn Limited Scope Radiography, it has been such a rewarding experience.

I request a favorable report on Senate Bill 830.

A handwritten signature in black ink, appearing to read "John Hovlid".

John Hovlid, BHS

Regional Radiology Manager
Midwest Region

Concentra

224-203-0028 (m)

Sheena Wenz-Testimony-HB 830.pdf

Uploaded by: Sheena Wenz

Position: FWA

February 26, 2024

Madam Chair & Members of the Finance Committee,

My name is Sheena Wenz and I am the National Director of Radiology Operations for Concentra and I have been a registered Radiologic Technologist for 15 years. Concentra is the nation's leading provider of occupational medicine. We have 540 medical centers nationwide, 13 located in the great state of Maryland. On average, Concentra performs 62,000 diagnostic x-ray exams per month nationwide.

There is currently a severe shortage of Radiologic Technologists (RTs) across the country, Concentra is not immune to this shortage and has been struggling in Maryland with RT staffing challenges. In addition to this unprecedented shortage, Radiologic Technologists in an occupational health setting perform on average 7-10 x-rays per day, in addition to their other duties as a medical assistant. Given underutilization of the RT skillset, many Radiologic Technologists tend to avoid positions in occupational health settings.

Currently, 34 states, including Virginia and Delaware, allow a pathway for a limited scope x-ray machine operator to perform basic diagnostic x-ray exams. I successfully hire, train, and staff limited scope x-ray technicians in 25 states and haven't had any adverse safety events to date. Concentra currently employs over 380 limited scope x-ray colleagues nationwide, with many enrolled in RT bridge programs in their respective states.

As Radiology professionals we need to expand our minds and think of Limited Scope X-ray as a great addition to our field, not a hinderance. Many professions within the medical field have varying degrees of skill levels with a progression of responsibilities in-line with their respective training.

I believe that this bill desperately needed in Maryland, it has been proven to be successful in other states and is not a new practice. I request a favorable report on Senate Bill 830.

Sheena Wenz, MHA, RT(R)

Sheena Wenz, MHA, RT(R)

National Radiology Director

Concentra

317-260-3373 (M)

3 - SB0830- FIN- BOP- LOSWA.docx (1) (1).pdf

Uploaded by: State of Maryland (MD)

Position: FWA



Board of Physicians

Wes Moore, Governor · Aruna Miller, Lt. Governor · Harbhajan Ajrawat, M.D., Chair

2024 SESSION POSITION PAPER

BILL NO.: SB 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist
COMMITTEE: Finance
POSITION: Letter of Support with Amendments

POSITION & RATIONALE:

The Maryland Board of Physicians (the Board) is respectfully submitting this letter of support with amendments for Senate Bill (SB) 830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist. SB 830 would establish a regulatory and licensing system for limited licensed radiologic technologists under the Board of Physicians. The Board thanks Senator Klausmeier for sponsoring SB 830 and looks forward to continuing to work with the Sponsor and stakeholders on this bill.

The Board supports establishing a limited-scope radiologic technologist option in Maryland and other initiatives to strengthen the struggling healthcare workforce and decrease emergency room wait times. However, the Board believes that a license is not the most effective regulatory option. The Board suggests that SB 830 be amended to remove “limited licensed radiologic technology” as a new license category and instead implement a Limited-Scope Radiologic Technologist Registration, with a sunset provision to re-evaluate in three years.

Licensure requires that the fees for a license are set at a rate to cover the cost of licensure. As many of the costs of licensing are fixed no matter how many people apply for the license, when a smaller number of people apply for the license, it can result in high fees for applicants and can be an additional barrier to licensure. A registration differs from a license because there is no Board verification of credentials required; therefore, the Board would not need to expend any additional resources. Given the fact that we are unsure if the population will be large enough to support licensure, the Board believes that registration is the most cost-effective and streamlined way to address limited-scope radiologic technologists at this time.

In addition, the Board is aware of proposed amendments to include chiropractors, advanced practice registered nurses, and podiatrists as authorized supervisors. The Board recommends removing these practitioners because they are not health occupations that are regulated by the Board under Title 14 of the Health Occupations Article, and are regulated by the Board of Chiropractic Examiners, the Board of Nursing, and the Board of Podiatric Medical Examiners. Therefore, any supervisory authority granted to practitioners in those health occupations must be

implemented in their specific practice acts.

The Board is also aware of proposed amendments to include physician assistants (PA) as authorized supervisors. Granting supervisory authority for PAs is incongruent with existing statutory limitations for PAs performing X-ray duties. PAs are limited in the ability to conduct X-ray procedures, may not perform X-rays of the chest or spine, and may perform only “nonfluroroscopic X-ray procedures of the extremities, anterior-posterior and lateral, not including the head,” *See* Health Occupations, § 14-306(e)(2)(iii) and (3)2.A; § 15-302(c)(2)(ii). Delegating supervisory authority to health practitioners with more limited scope in performing X-ray duties than the practitioner they are authorized to supervise conflicts with existing statutory provisions.

In general, SB 830 also needs amendment to clearly state the type of supervision required. It is the recommendation of the Board that supervisors are physically present on-site or on the facility premises and able to respond in person.

The Board would also like to note the effective date of enactment, October 1, 2024. The bill requires the completion of an educational program with a certain amount of clinical and didactic hours. The Board is unaware of any education program in Maryland that satisfies this requirement. Therefore, the Board suggests reconsidering the effective date to allow local educational programs to be established that meet the requirements of this bill.

Thank you for your consideration. For more information, please contact Matthew Dudzic, Manager of Policy and Legislation, 410-764-5042, or Madeline DelGreco, Health Policy Analyst, 443-591-9082.

Sincerely,

A handwritten signature in cursive script that reads "Singh Ajrawat".

Harbhajan Ajrawat, M.D.
Chair, Maryland Board of Physicians

The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.

OPPOSE SB0830.pdf

Uploaded by: Alia Johnson

Position: UNF

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. Limited training and qualifications: Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
2. Addressing shortages through alternative means: Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. Efforts such as expanding clinical rotation experiences and increasing admission numbers to radiography programs demonstrate proactive steps towards alleviating workforce shortages without compromising patient safety. The introduction of Limited Licensed Radiologic Technologists does not alleviate the job shortage, but in fact, causes greater shortages in hospital radiographer positions, particularly in the advanced imaging departments of cat scan, MRI, mammography, and interventional and cardiology catheterization labs, which are in dire need of staff.
3. Patient safety concerns: The limited scope of practice outlined in SB0830 may expose patients to unnecessary risks by allowing individuals with inadequate training to perform radiographic procedures. Ensuring the highest standards of patient care and safety should be paramount in any legislative endeavor related to healthcare professions. The proposed bill states, "Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body." All x-ray machines are the same and can deliver harmful amounts of radiation to patients. With limited training on such machines, the harm to the community is real. 15 clock hours of radiation protection education is not sufficient to protect patients. Most Radiography program students receive over 75 hours of radiation protection education, for example.
4. Potential long-term impacts: We have a robust mechanism for licensure for the field of radiography in this state already. If you open the door for the job category of Limited Licensed Radiologic Technologist, you can never close it. These less-trained workers will

be able to perform about 50% of the studies that are currently designated to be performed by a licensed radiographer only. Outpatient and urgent care centers will never hire a full radiographer if they can hire a Limited Licensed Radiologic Technologist. Even hospitals will hire less radiographers forever more. Job opportunities for radiographers will decrease and will never recover after the shortage is over. Radiography programs will never be at full capacity as once was. This will decimate the radiography profession in Maryland, a profession that takes three years of comprehensive training and an associate degree, and patients will be at harm. Do not cheapen our profession, especially when it is not needed.

I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Alia Johnson

SB0830..pdf

Uploaded by: Amy Lewis

Position: UNF

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Sincerely,

Amy Lewis

Opposition to SB0830.pdf

Uploaded by: Anita Patel

Position: UNF

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

Senate Office Buildings
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senators on the Finance Committee,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

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Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Anita Patel

SB0830 Klausmeier Letter.pdf

Uploaded by: Anthony Corona

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401
2/26/2024

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

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Sincerely,

Anthony Corona

Copy of SB0830 Klausmeier Letter.pdf

Uploaded by: Antoinette merryman

Position: UNF

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Sincerely,

Susan Morgan B.S , RT(R)M, MR

SB0830 Klausmeier Letter.pdf

Uploaded by: Brianna Aaron

Position: UNF

Brianna Aaron
22 Blake Court
Reisterstown, MD 21136
baaron@terpmail.umd.edu

2/26/2024

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. Limited training and qualifications: Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
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3. Patient safety concerns: The limited scope of practice outlined in SB0830 may expose patients to unnecessary risks by allowing individuals with inadequate training to perform radiographic procedures. Ensuring the highest standards of patient care and safety should be paramount in any legislative endeavor related to healthcare professions. The proposed bill states, "Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body." All x-ray machines are the same and can deliver harmful amounts

of radiation to patients. With limited training on such machines, the harm to the community is real. 15 clock hours of radiation protection education is not sufficient to protect patients. Most Radiography program students receive over 75 hours of radiation protection education, for example.

4. Potential long-term impacts: We have a robust mechanism for licensure for the field of radiography in this state already. If you open the door for the job category of Limited Licensed Radiologic Technologist, you can never close it. These less-trained workers will be able to perform about 50% of the studies that are currently designated to be performed by a licensed radiographer only. Outpatient and urgent care centers will never hire a full radiographer if they can hire a Limited Licensed Radiologic Technologist. Even hospitals will hire less radiographers forever more. Job opportunities for radiographers will decrease and will never recover after the shortage is over. Radiography programs will never be at full capacity as once was. This will decimate the radiography profession in Maryland, a profession that takes three years of comprehensive training and an associate degree, and patients will be at harm. Do not cheapen our profession, especially when it is not needed.

I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Brianna Aaron

SB0830 Klausmeier Letter.pdf

Uploaded by: Brittany Mullins

Position: UNF

Brittany Mullins
34 Nicholson Dr
Pasadena, MD 21122
443-790-1087

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. My biggest concern as a licensed Radiographer of 8 years is that there isn't a possibility that a mere 50 hours of training will prepare you to become an x-ray technologist. It took my coworkers and I 2 years of hard, intense training. Not only will this put patients at severe risk of increased doses of radiation due to incompetent technologists, this will also affect our work flow in the hospitals. We will essentially have to work beside untrained technologists, it will cause increased stress, and a decline in staffing in Radiology departments.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Brittaney Mullins RT(R)

Copy of SB0830 Klausmeier Letter.pdf

Uploaded by: Brooks Bryant

Position: UNF

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Sincerely,

Brooks Bryant

Testimony .pdf

Uploaded by: Christopher Diehl

Position: UNF

29 Craig Ct
Conowingo, MD 21918
Capt-Chris@hotmail.com
2/27/2024

I am writing to strongly oppose SB0830, Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist.

As a concerned resident in Maryland, I believe this proposed legislation will introduce safety concerns and challenges for both patients and radiologic technologists.

With only acquiring 50 hours of clinical and didactic training, patients will receive inadequate and non-diagnostic imaging. Thus, having the technologist repeat the imaging and increasing the patient's exposure to radiation. In addition to this concern, patient safety is at risk due to only having fifty hours of training, such as patient care and operating X-ray equipment. Licensed technologists must go through courses for radiation protection to understand patient radiation dosage depending upon multiple factors such as age and body habitus. This puts our younger population at risk for higher rates of cancer due to the inadequate schooling and training. Students of the radiography programs undergo 75 hours of radiation protection; whereas, the limited licensed tech is required to only have 15 hours.

With hiring limited technologists at a lower pay rate, outpatient centers, such as orthopedic offices and urgent cares, will be less likely to hire registered and licensed technologists at the average full time hourly rate. This will result in mass layoffs at these companies or pay cuts in current full time licensed techs. SB0830 will limit the jobs available for licensed technologists as well as lower the payscale and degrade this profession.

With the fifty hour training for limited licensed technologists, this can result in multiple schools eradicating the radiography programs. These programs are crucial in this profession by producing well trained technologists. The programs are designed to have at least 1600 hours of clinicals and 54 competencies within two years. Those that are interested in the program will try to take advantage of the 50 hour training rather than extensive learning to become an adequate technologist which will lead to a decrease in

students applying to the programs. This legislation will not help the radiologic technologist shortage but will hinder our profession.

Thank you for considering my concerns towards SB0830. I trust that you will uphold the healthcare standards and patient safety. I urge you to reconsider this legislation and withdraw support for this. Do not degrade this profession or put the general population at risk.

Sincerely,
Christopher Diehl

SB0830 Senators Letter.pdf

Uploaded by: Colleen Tracey

Position: UNF

Colleen Tracey R.T.(R)
779 Willowby Run
Pasadena, MD 21122
(410)279-1658
February 23,2024

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

Senate Office Buildings
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

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Sincerely,

Colleen Tracey R.T. (R)

SB0830 Klausmeier Letter (1).pdf

Uploaded by: Dana Enlow

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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Sincerely, Dana Erlow RT(R)

[Your Name]

SB0830 Klausmeier Letter (002).pdf

Uploaded by: David Breitfelder

Position: UNF

7601 Osler Dr
Towson, MD 21204
Davidbreitfelder@umm.edu
443-801-1424
02/26/2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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David Breitfelder

David Breitfelder
Director of Imaging and Cardiovascular Services
UM SJMC
Towson, MD 21204

oppose SB0830.pdf

Uploaded by: Debbie Lam

Position: UNF

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Debbie Lam, R.T (R) (M) (CT)

2022 April Advisory Board minutes (2).pdf

Uploaded by: Erin Phelan

Position: UNF



Radiography Program Advisory Board Meeting

Date: April 5, 2022

In Attendance: CCBC Representatives: Erin Phelan, Diane Flint, Debbie Lam, Rhande Meggett, Rick Svoboda, Jessica Shirkey, Alison Nantz, Brandy Jones, Sara Lillard, Hesham Henein, Susan Landry, Deborah Johnson

Student Representatives CO2023 – Michael Carpenter, Sara Thompson, and Samantha Tidey

Off-Campus Members: Shannon Carter (*Medstar Franklin Square*), Adia Johnson (*Lifebridge Northwest Hospital*), Natalie Majewski (*ExpressCare*), Shelly Young (*UMMS Upper Chesapeake/ Harford Memorial*), Kelly Kunze (*RadNet*), Leticia Armstrong (*GBMC*), Fitzhugh Alford (*UMMS Midtown*), Lisa Ziegler (*Upper Chesapeake Medical Center/Harford Memorial Hospital*), Shelly King (*Advanced Radiology*), Adrienne Haney, (*UMMS Saint Joseph Medical Center*) Jennifer Falavigna (*Medstar Union Memorial/Good Samaritan Hospitals*)

Recorder: Erin Phelan

Transcriber: Deborah Johnson

Topic	Discussion	Actions/Recommendations
Welcome/Introductions	Erin Phelan welcomed and thanked everyone for being in attendance. She introduced Diane Flint, Assistant Dean SOHP. Ms. Flint thanked Erin for inviting her to join the committee. All attendees introduced themselves and their roles. The CO2023 representatives introduced themselves.	

<p>Clinical Facilities Updates</p>	<p><u>Shannon Carter</u>, with MedStar Franklin Square Medical Center reported on the growth of her site; new equipment, a new Cath Center, and prep for the joint commission and hiring new graduates.</p> <p><u>Natalie Majewski</u>, with ExpressCare states they have opened three new locations, and will need techs for all locations, and they received a new Fuji machine.</p> <p><u>Adrienne Haney</u>, with St. Joseph recently replaced one C.T. scanner, a second to be replaced by June. Recently became the premier hospital for Kaiser Permanente insurance.</p> <p><u>Kelly Kunze</u>, with Advanced Radiology states they are upgrading CT's and upgrading software on M.R. scanner. They also have several tech openings in various modalities.</p> <p><u>Fitzhugh Alford</u> with University of Maryland Midtown states he is expecting a new C.T. scanner in October.</p> <p><u>Jennifer Falavigna</u>, with Medstar Union Memorial and Good Samaritan hospitals, states it is exciting that students are finally able to train at Union.</p> <p><u>Adia Johnson</u>, with LifeBridge states there are 39 positions open with a potential \$10,000 sign on bonus even for new graduates.</p> <p><u>Lisa Ziegler</u>, with Upper Chesapeake and Harford Memorial hospitals states that they are having similar staffing issues. HMH will be closing soon, and Aberdeen location will be opening soon.</p> <p><u>Letitia Armstrong</u>, with GBMC states that they are glad to have students back.</p>	<p>Lisa to work on getting a new affiliation agreement for new Aberdeen location when the time comes to transfer HMH students to Aberdeen.</p>
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Approval of minutes from last meeting	Motion to approve was made by Rhande Meggett and seconded by Jessica Shirkey.	
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	<ul style="list-style-type: none"> • RADT 224 is the last remaining course content to finish creating for the new curriculum. It is a professional seminar course with no course tests, just Radtechbootcamp for Registry review quizzes and tests. There will be a mock Registry exam at the Testing Center instead of a final, to simulate lifelike Registry exam conditions. • We currently have 68 verified applications, and still 40 people in progress. • RADT 101, which started last fall is now a prerequisite, started last fall. Feedback is very good. Rhande will do a two-week clinical orientation in the fall for CO24, before they start clinical rotations in Week 3. • There will be a lab observation session for admissions this summer, instead of hospital observations. Next admission cycle, we will get back to hospital observation sessions. Discussion took place to ask other hospitals to participate and how this process will look. • Current prerequisite of Physics 101 drop/or maintain. The consensus was to drop. Other Radiography programs do not require it, and none of the material in PHYS 101 is included on curriculum analysis grid. Advising/Admissions stated that there may be an influx of even more applications if PHYS 101 is dropped. Erin stated that diversity in cohorts is small, and maybe diversity will increase if PHYS 101 is dropped. <p>d) Continuing Education opportunities:</p>	<p>Keep a lookout for more RADT 101 feedback.</p> <p>Hospital observation sessions are better. Other facilities agreed to participate. Erin and Susan Landry to discuss the process for next year's cycle and will give an update later in an email.</p> <p>Next cycle will be the LAST to require Physics 101 as a prerequisite. Erin to update all interested parties at CCBC, including Advising and Physics department, for pipeline students. Update RADT 101 to reflect changes.</p>
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	<ul style="list-style-type: none"> • Erin looking at creating CEU activities next year and asked for suggestions, whether in-person or online. ECHP is a perfect space to hold events, and Erin is looking into buying software for online CEU creation, along with the Continuing Education department cooperation. • Debbie Lam spoke on collaborating with the CCBC Medical Assistant program in Continuing Education department to start a new job opportunity in the state of MD. The idea for a highly skilled medical assistant combined with imaging tech aide skills is needed and was put forth by RadNet, who are starting to use tech aids to help remote CT/MRI technologists perform scans. Erin and Debbie have spoken with Donna Rowan about adding an imaging piece to the Medical Assisting curriculum and having clinical rotations at imaging centers. The Medical Assisting program would have to include venipuncture in its curriculum for this to work. Many students are taking RADT 101 and are not getting into the Radiography program. If students did not want to wait for admission, they have the prereqs for Medical Assisting and could have a great career as an imaging medical assistant. The MA program at CCBC is accredited and grads sit for a licensing exam, so the infrastructure, along with RADT 101, is already there. RadNet agreed that this type of high-level imaging medical assistant would be valuable to their plans and would support our initiative with 	<p>Send Erin any suggestions for CEU needs.</p> <p>Erin to update Board after more talks with the Continuing Education department.</p>
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	<p>clinical rotations. Other facilities, such as Franklin and LifeBridge, agreed.</p> <p>e) Clinical update:</p> <p>i) Pandemic issues:</p> <ul style="list-style-type: none"> • Clinical sites taken away • Clinical capacity cut in half • Students not allowed to perform on Covid-positive or PUI patients • Fluoro rotations taken away, when fluoro studies are desperately needed <p>ii) Need more pediatric rotations</p> <ul style="list-style-type: none"> • There has been a decline in pediatric examinations. • Students are not able to perform pediatric exams, because there are no comp testers and/or patients available. • Rhande asked if any clinical sites are expanding pediatric units. They are not. <p>iii) Imaging reminder/lab manual</p> <ul style="list-style-type: none"> • Students need to have Black Books and Lab manuals present when imaging and comp testing is taking place. Black Books are good reminders for CIs what students are learning in positioning since it could be different from their own training. <p>iv) Clinical Instructor Workshops</p> <ul style="list-style-type: none"> • Traditional in-person CI meeting with food will start up again January 2023. 3 CEU credits from ASRT. • Searching for software that will allow for CEU creation, tracking, and giving out ASRT-approved certificates of completion. • Can create online modules for initial CI training, maybe a complementary one to go 	<p>If any clinical location will be expanding pediatric units or services in the future, please remember that Radiography students need more peds training.</p> <p>Clinical sites to send out reminders to all CIs, that all students need to present Black Books and Lab Manuals when imaging and comping.</p>
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	<p>along with Rhande's training. This may free up time for her.</p> <ul style="list-style-type: none"> • Also looking at creating refresher modules for CI duties, to keep CIs up to date with program changes. • We should have a mandatory small online module every three years to keep their JRCERT-approved clinical instructor status. • Erin requested that we be sent an email if a clinical instructor leaves the site. <p>f) Lab Update</p> <p>i) Mastoids/temporal bones</p> <ul style="list-style-type: none"> • Rick asked all who work at clinical sites their opinion on continuing to teach Mastoid/temporal bones. No, they go to CT. There was a suggestion by Adrienne to replace mastoids with cochlear implant views or shunt surveys or dial views for shunts. Rick and Adrienne will consult on this. • Rick updated that we now have a portable machine and a C arm that is used to train students in introductory labs. An Introduction to Portable Radiography lab and surgical procedures was given, which utilized our C-arm. This helps new students with their first rotations in these areas. • For the first-year students, we added a shared day with the Surgical Tech program, allowing both students to share information about their programs, which was beneficial to all. • For the second-year students, we incorporated a quality control experiment with the portable machine to go over how to 	<p>Send the program a message when a JRCERT-approved clinical instructor resigns, so we have as much advanced notice as possible to train someone else.</p> <p>Rick to consult with Adrienne about replacing mastoids with cochlear implant and shunt views.</p>
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	<p>reboot, relog into machine, perform flat field test to confirm machine was working properly. This helps students identify troubleshooting areas on clinical rotations.</p> <ul style="list-style-type: none">• Also, for CO2022, A trauma exposure experiment was given to the students in the fall before they were tested on trauma labs, which helped students be more successful in passing final trauma labs.• We purchased moulage stickers that look like wounds, glass, and a fake spike, so we will introduce a little more realistic trauma simulation. The students are given scenarios of how to act and what to say. Trauma labs will be updated to reflect different scenarios.	
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<p>Advanced Modality Programs Updates</p>	<p>Debbie Lam spoke on CT, MRI, and Mammography.</p> <ul style="list-style-type: none"> • In 2020 13 CT students graduated. • In 2021 9 CT students graduated. • Our Registry Review courses in CT/MRI (RADT 236, 246) have not been popular. This may be due to lack of advertising. • In 2020 7 MRI students graduated. • In 2021 8 MRI students graduated. • We currently have 9 students enrolled in MRI. • Applications for CT and MRI are open for enrollment: July start for CT and fall start for MRI. <p>Debbie's thoughts on why there is a decline in student enrollment.</p> <ul style="list-style-type: none"> • Nationwide shortage of RTs • There used to be more respect for techs who transitioned to advanced modalities, but no more. • Not getting a good pool from CCBC Radiography students, maybe students see the working conditions while in the program and the current pay rate for advanced modalities is not worth the price of further schooling for them? • Maybe new grads and even seasoned techs want to be able to be multi-modality techs and use x-ray and advanced modality skills, but are not allowed to do that once hired. • Techs are not supported by employers to attend another educational program to get licensed in another modality 	<p>Remind technologists that we have 1 credit, Registry Review online courses in CT and MRI for CQR purposes.</p>
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	<p>Remedies?</p> <ul style="list-style-type: none"> • Creating multi-modality positions • Consider a 12 hr. and 4 hr. clinical rotations. • Suggested the site pull from their pool of experienced techs for a day of observation in one of the advanced modalities to drum up interest. • Would consider keeping an employee/student at same site for entire program and create a flexible schedule with manager of site. • Consider some type of incentive package for a multi-step increase to go through training and licensure. • Debbie also asked the attendees not to hire students before they graduate from the program since statistically, those techs never take the licensing exams. Interested students for hire can stay at site, but not be allowed to train other students. <p>A discussion took place asking why students cannot get paid by employer while being on clinical duty for CCBC. It is a liability issue.</p> <p>Mammography update</p> <ul style="list-style-type: none"> ▪ Mammography courses are popular. ▪ Debbie described the Mammography courses and showed photos of the lab, equipment, and Hologic unit. ▪ Since starting in the fall of 2019, we have graduated 31 Mammography students. ▪ This May, 7 more will graduate 	<p>Clinical sites need to look at suggested remedies to increase interest in attracting new CT/MRI techs.</p> <p>Advanced Imaging will be very flexible with required clinical hours and managers who want to hire students, if students stay in the program.</p> <p>Erin to inquire what other SHP programs do for employee-specific clinical rotations and will search accreditation standards.</p>
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	<ul style="list-style-type: none"> ▪ Already seeing interest in fall 2022 courses. 	
50th anniversary of CCBC Radiography program	<ul style="list-style-type: none"> • Erin spoke on the 50th anniversary and gave us the backstory for the program. • Coming up in 2023. • Asking for old photos • She would like to do a presentation of the classes over the years. 	<p>Send any old photos of previous classes to Erin for Anniversary celebration.</p>
Class of 2023 Student Representatives speak. <ul style="list-style-type: none"> • Michael Carpenter • Samantha Tidey • Sara Thompson. 	<ul style="list-style-type: none"> • Currently learning the spine, already completed lowers, and uppers. • Shout out to outstanding techs: • Judy and Lindsay at Good Sam, • Troy at Midtown, • Karen and Sharon at Harford Memorial, • Amy, and Kathy at 201 Plum Tree • Joshua Kelly at GBMC • Taylor and Nate at Upper Chesapeake • Laurie at Fleet St. • Alex, Marlon, Mike at Franklin Square • There is a desire for more high-level trauma experience, especially in lab. <ul style="list-style-type: none"> • In the past they were able to go to observe shock trauma. • Students suggest a trip to the medical examiner's office. • Rotating in a pain management setting. • Students would like to have the anatomical models currently stored in the closet to use/pass around in lab. • They find the old skeleton given to them to use in anatomy is especially useful. 	

	<ul style="list-style-type: none">• Also having an on-site clinical coordinator at each site, or a lead tech to focus on students and organize them.• Every site needs to have an imager available. This would be extremely helpful in completing an evaluation for an image or comp.• Students would like to have the work emails of the techs, so they can send a text to them when they have a need for evaluation. The pink slips currently being used are not useful.• Since different sites have different expectations, the students would like a way of getting that information either on a sheet of paper on a pinboard or a little binder detailing what to do and where things are such as restock linens, and where to find the linen cart, how to restart the X-ray machine, additional information such as maps for how to get around the departments from the main entrance.• It was suggested that students could volunteer to create maps and video directions from the entrance to the parking lot for incoming students.• Students would like feedback from the techs as to how they are doing on clinical evaluations, i.e., Good job, keep up the good work. Techs may need to be trained in this procedure.• The students discussed appropriate uniforms and asked if skull caps were okay to wear.	
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	<ul style="list-style-type: none">• Restrictions on tattoo policy was questioned by students.• Response to extra lab time and hands on practice was addressed by Erin and it was suggested that students should get involved instead of just observing when they know how to do these things.• Response: Regarding extra practice hours, we can open from 3p.m. - 5p.m. or Saturday morning.<ul style="list-style-type: none">○ Students closing comments:○ The RADT 101 prerequisite is a great idea, especially in assuring this is the right career for us.○ Having an onboarding process prior to the semester helps assures the students are all set.○ Love the new uniforms○ Everyone has felt supported by lab instructors, and feel they are set up for success with the program and the techs onsite.○ Appreciation of the new building with the Resource Room and Testing Center.○ Expressed satisfaction with the small class size, how curriculums are set up and categorized and how it is broken down in a logical way that makes sense.○ Students think it is awesome that CCBC graduates are at their sites.○ And finally, a shout out to Alison and Brandy lab instructors and Rick as a teacher and lab instructor.	<p>Any clinical sites changing their stance on tattoos? Erin will send out an email asking if there have been any changes in the uniform polices. She asked the attendees remaining to let her know of any of these changes.</p>
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Conclusion	<ul style="list-style-type: none">• Erin asked if there were any comments• Erin thanked the students and attendees expressing her appreciation for their hard work.	
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2023 October Advisory Board Minutes (1).pdf

Uploaded by: Erin Phelan

Position: UNF



Medical Imaging Programs Advisory Board Meeting

Date: October 25, 2023

CCBC Representatives: Erin Phelan, Debbie Lam, Rhande Meggett, Jessica Shirkey, Alison Nantz, Brandy Jones, Marina Faybusovich, Sally Sawyers, Susan Landry, Sara Lillard, Hesham Henein

Student Representatives – Dylan Coleman and Noah Ford, Class 2024

Off-Campus Members: **Adrienne Haney** (GBMC), **Deb Windsor** (MedStar Good Samaritan/Union Memorial), **Jennifer Falavigna** (Medstar Good Samaritan/Union Memorial Hospital), **Erica Pullins** (Johns Hopkins Cath Lab), **Wendy Ward** (MedStar Good Samaritan/Union Memorial), **Shelley Schenning** (Advanced Radiology), **Katina Barnes** (Mercy Hospital), **Cortni Herod** (Patient First), **Adia Johnson** (Northwest Hospital)

Topic	Discussion	Action/Recommendation
Welcome/Introductions	<ul style="list-style-type: none"> ➤ All attendees introduced themselves and their roles. Erin Phelan welcomed and thanked everyone for being in attendance. 	
Approval of minutes form last meeting	<ul style="list-style-type: none"> ➤ Approval of fall 2022 meeting minutes 	
Radiography Program Updates	<ul style="list-style-type: none"> ➤ Our Radiography Program currently has 25 students in our 2nd year class and 41 students in our 1st year class. ➤ We have expanded partnerships and added new locations in addition to our long-standing partners. We are authorized in the following locations: <ul style="list-style-type: none"> • Ascension St. Agnes Hospital • Advanced Radiology (Annapolis; Ellicott City, Fisher, Quarry Lake, Seven Squares, Timonium) • LifeBridge Northwest 	

- Mercy Medical Center
- Mercy Personal Physicians (Lutherville and Overlea)
- Patient First (Bayview, Bel Air, Lutherville, Perry Hall, Towson, White Marsh)
- University of MD Greene Street (AACC agreed to share OR & Ports)

➤ New Hires

- Since March, Jessica Shirkey was finally hired as a FT faculty member. Sally Sawyers is our new ASA for Medical Imaging. We are now a fully staffed department, which has been a long time in the works.

➤ JRCERT

- After our December 2022 site visit, JRCERT awarded us 8 years accreditation, which is the highest number of years you can achieve. Thank you everyone who helped with this achievement and the successful outcome. The interim report is due in 5 years, which is 2026 and the next site visit will be in the 4th quarter of 2030.

➤ ARRT Statistics

- Erin shared the ARRT results from the National Comparison Report and Annual Program Summary Report with the board, which reflect Class of 2022 since it is a year behind. It was an interesting year since we had started a new curriculum; we had COVID prior to that and we could only take 18 students. All 18 started, graduated and passed the registry the first time. All of them have found jobs. The National Comparison for 2022 was 83.5% of first-time test takers passing where CCBC had 100%; the scaled means score was 82.4% nationally and this was the first time there was a great leap forward in the average test score. So, Class of 2022 scored 2 points or more over the national average, which is impressive. Erin showed the Class of 2022 Assessment Plan where our benchmark is 84% and the

Class of 2022 scored 93.4% and Class of 2023 scored 93.5% and at this time, we do not have anything for Class of 2024 yet. The comparison graph was updated to reflect those changes.

➤ Outcomes Assessment Data

GOAL #1: Students will be clinically competent.

- A1 and A2: Students will demonstrate positioning skills.
Positioning skills (A1) on the lab form showed a benchmark of 85% and Class of 2022 scored 93.4 % and Class of 2023 scored 93.5% and we do not have the data for class of 2024 yet. Erin started a new chart with the new curriculum which started in the summer of 2020. A2 (Questions 4 & 5) the Class of 2022 scored 89.26% and Class of 2023 scored 90.2%. So, we are well above the benchmark of 85%.
- G1 B1: Students will select appropriate technical factors which deals with math and physics in RADT 123's first two tests, and with the old curriculum we struggled to get the score above 80%, but the new curriculum has improved the results to 82.5% for class of 2022, class of 2023 scored 84% and class of 2024 scored 84.4%. So, we are very happy with how this is improving everything. We also started utilizing RadTechBootcamp which has been an amazing tool for students. Exposure Module tests (RADT 123 test 1 & 2) were going well for a while, but we struggled with the class of 2018 at 76.1%, class of 2019 at 78.6%, class of 2020 at 77.8%, and class of 2021 at 79.9%. Then the new curriculum was implemented, and things started to go up with the class of 2022 at 82.5%, class of 2023 at 84%, and class of 2024 at 84.4%. This seems to be going very well didactically with the initiation of RadTechBootCamp.
- G1 B2 Technical factors in class and on live patients (Comp forms 6 and 13) are very strong with class of 2022 at 92.8% and class of 2023 at 95%, all above the benchmark of 85%.
- G1 C1 The Radiation Protection Final exam shows up well above the benchmark of 80% and class of 2022 came in at 85.7% and

	<p>class of 2023 at 81% and class of 2024 with take this at the semester.</p> <ul style="list-style-type: none"> • <u>G1 C2 the Radiation Protection (comp form 7 and 15)</u> shows class of 2022 at 92.7% and class of 2023 at 91%, again well above the benchmark of 85%. <ul style="list-style-type: none"> • GOAL # 2: Students will use critical thinking skills. • <u>G2 A1: Students will manipulate technical factors for non-routine examinations (i.e.: portables/ or/trauma/ Pediatrics.)</u> Students will use critical thinking skills and the tools we use are technical factors for non-routine exams which have all been successful as shown in the assessment data for class of 2022 and 2023. • <u>G2 A2: Trauma labs (Question 6- with portables, trauma PEDs</u> which are, again above the benchmark of 85%, with class of 2022 scoring 94.1% and class of 2023 with 90.5%. • <u>G2 B1: Evaluating Images in Image Analysis class,</u> which is scored at 40/50 points and class of 2022 got 48.2 and class of 2023 got 49.1. • <u>G2 B2: The Preliminary Image Evaluation</u> grading we do is very high for both classes 2022 and 2023, so we are very happy with their critical thinking skills. <ul style="list-style-type: none"> • GOAL # 3: Students will communicate effectively. • <u>G3 A1: Students will demonstrate effective written communication skills.</u> This ranges around 92% for the 1st semester in RAD 121 with the class of 2022 and 2023 at 92.7% and the 2nd semester we upped the benchmark with their writing from 75% to 85%. • <u>G3 A2: CT Clinical Objective Component (worksheet 2.)</u> The class of 2022 scored 93.8% and the class of 2023 scored extremely high at 99.8% which was almost perfect. • <u>G3 B1: Film Critique presentation.</u> Both classes scored very high in the oral communication skills part of the rubric. With a benchmark of 80%, class of 2022 was at 97% and class of 2023 scored 98%. 	<p>Erin will send out Employer Evaluations in January 2024. Please make sure to fill them out as this is assessment data for JRCERT.</p>
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- G3 B2: Employer Survey. This was 100% for the class of 2022. Erin will send these out for the class of 2023 so please fill these out which give us important feedback and communication for each class. This is done 6 months after graduation with a benchmark of 85%.

GOAL #4: Students will evaluate the need for professionalism.

- G4 A1: Students will demonstrate professional behavior. There are a few questions on the Clinical Evaluation form (Questions 2-8) regarding professionalism and students in both classes scored very high. Class of 2022 had 93.8% and class of 2023 scored 94.7%.
- G4 B1: Students will understand professional ethics. Ethics is a new tool in the new curriculum with specific class assignments where students must research cases where someone was sued or something similar, to show a radiology mistake and do a report on it. This should reflect violations in ARRT standards and what could have been done to avoid this. All have passed and are well above the benchmark of 85%. With class of 2022 at 89% and class of 2023 at 96.6%.

GOAL #5: The program will constantly measure its effectiveness in graduating entry level technologist.

- G5 A1: Competent students will complete the program. The completion rate shows the class of 2022 at 100% and the class of 2023 at 90%. Erin had been doing a straight percentage (which was incorrect since students who leave for personal reasons should not be included) so these percentages are, technically, even higher, starting for the Class of 2024.
- G5 B1: Graduate will pass the ARRT Registry certification on the 1st attempt. The ARRT Exam scores were also very good with class of 2022 at 100% and class of 2023 at 88.2% (well above the benchmark of 75%.)
- G5 C1: Students will score at or above the national average on the ARRT exam. What is particularly important is Class of 2022 are the 1st class scoring 6 points higher than the national

Erin to follow the JRCERT guidelines for calculating completion rates from the Class of 2024 onward. Reasons for leaving, such as family matters, do not count for completion rates.

average and this is the class that had the new curriculum, so this was monitored very carefully. After we get the National average for ARRT we will compare it to 84% for the class of 2023.

- G5 D1: Employers will be satisfied with the educational preparedness of graduates. This is sent out 6 months after graduation and with a benchmark of 80% and class of 2022 was 90%.
- G5 E: Students will express satisfaction with the radiography program, with answers of Good or better. Exit Interviews are where students can express their satisfaction or dissatisfaction with the program, but we received 100% and the employment rate is very high as well.
- G5 F1: Of those seeking employment, graduates will obtain employment. This is done 12 months after graduation and the class of 2022 was at 100%. Erin thinks this will continue, especially with the employment rate so high and so many jobs available.
- Technical Standards Review
 - Radiography Standards
 - These were updated with modern terminology and changed some of the language. Old film and chemical information were removed. The standards are given to the pre-applicants in RADT 101, so they are familiar with the requirements and physical and mental expectations of the job. Students come into the program aware of the intellectual, physical and emotional specifics of this program and what their job after graduation will entail. Erin updated the list to include blue light from computer screens, the ability of 25 lbs. and walk short distances. If someone is unable to do these things, with a doctor's note we won't schedule clinicals until they can meet these

	<p>requirements. There is an acknowledgment page that states they cannot proceed with the observation session which is part of the admission process. This must be signed before they go on their observation day; they also sign an agreement for infection control and patient confidentiality. Each hospital has criteria that each student must follow, and this is explained fully. The board approved.</p> <ul style="list-style-type: none"> ○ MRI Standards <ul style="list-style-type: none"> ● These are basically the same as the radiography standards except we added in MR safety and operating the coils and various safe practices. This reads as a job description for an MRI technologist, with additions of adequate eyesight and hearing, interpersonal skills, frequent exposure to strong magnetic field vs. radiation, etc. with an acknowledgement/signature page. The board approved. ○ CT Standards <ul style="list-style-type: none"> ● Again, Basically the same except added in drawing up contrast and added in radiation. The board approved the review of these standards with the addition of adding standards regarding contrast material (drawing up contrast and recognizing adverse reactions, etc.) ➤ Electronic Orders <ul style="list-style-type: none"> ○ This was requested to be added to the agenda by Kelly Kunze who was unable to attend today. However, we do not teach E-orders because there are so many different EMRs, but we are always open to adding practical skills for students. Shelley Schenning will take that information back to Kelly for future reference. It 	<p>Erin will add standards regarding contrast material/ reactions to the CT and Radiography Technical Standards.</p>
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	<p>would be nice to have students have some exposure to the computer side of the RT job, possibly adding some EPIC training to RADT 123 in the future. Most EMR technology has “playgrounds” to help with becoming familiar with the system, but Erin has reached out to EPIC and there are no training modules for school programs to use. Jennifer Falavigna suggested CIs just show students what they are doing with labs, etc. while they are doing it so students can have a little exposure to the process. Erin agreed and said maybe the program can add in a little training before they go to clinicals just for familiarity. Rhande mentioned push back from techs.</p> <ul style="list-style-type: none"> ➤ Clinical Update <ul style="list-style-type: none"> ○ We will be holding our annual Clinical Instructor Workshop on January 24, 2024, with lunch at 12:30 pm and the workshop will be 1:00 pm - 4:00 pm. If sites can spare people the time to attend, we would appreciate it. We will go over clinical policies, comp testing and remind them of their CI duties as well as inspire them through this workshop. ○ Erin touched on how pretest procedures are going which just started this fall. This is a pre-competency replacing imaging where any technologist can fill out the form. Students like it because they can do 3 -4 successfully; then they are allowed to move to test with a CI. No negative issues reported, and this process seems to be working. Rhande did report that turnaround time for these evaluations is maximum time of a week; some have been coming to her months late and that is unacceptable. She does send a reminder email through Evaluate since these evaluations count toward the students’ grades. Erin reminded everyone that there are also pink slip reminders where students can leave as a reminder when things are due, especially 	<p>Shelley Schenning will take information back to Kelly Kunze for the future.</p> <p>We will re-address the possibility of going over EPIC and E-orders with students, so they have some exposure for their clinicals.</p> <p>Allow at least one CI from each office or site to attend CI Workshop on January 24, 2024.</p> <p>Remind all techs to fill out Pretest evaluations as soon as possible to not hold up students’ progression.</p>
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	<p>the re-tests. If techs need help to fill out these forms, please reach out or use the link in the email. Rhande does stay on top of this, and she communicated with all the instructions and support for our techs. There are also copies available in the student handbook if students need to copy and give to their CI.</p> <ul style="list-style-type: none">○ Two years ago, we implemented a new Clinical Warning form which can document issues, attitudes, or any behavior on site; anything a student may need to correct. You don't have to use it but it's there and anyone can always, as usual, communicate with Rhande. This form has a clear pathway with 1st and 2nd offenses, so the documentation is clear for what students may need to correct. Rhande this helps in Evaluate as a formal method which she sees before the students do and she can have a warning ready to meet and address with student.○ Criminal background checks vary with each Affiliation Agreement per site. Our students pay a fee for the drug screen and background check with Castlebranch after they are admitted into the program, so admission is not based on other sensitive information. Students are admitted provisionally, and then they need to pass everything and go through the onboarding procedure which includes a background check. Some Affiliation Agreements are clear as to which entity does what but in the School of Health Professions, we don't screen students who are coming to your site. GBMC might accept something MedStar does not, so in our program we do not approve or disapprove of where a student is assigned based on their criminal background check. The clinical sites can check Castlebranch. Mark Bailey at Mercy has been extremely diligent about this for us. Deb Windsor acknowledged there have been a lot of	<p>Communicate with Rhande about any clinical issues.</p>
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	<p>changes and agreed it should not be up to the program to oversee this process. With that being said, sites know we see these, and between Mark and Rhande have eyes on these screenings for all our students. The affiliation agreements state that criminal background checks need to be done on all students but does not say anything about the approval process. MedStar is unclear, GBMC's HR doesn't do it, Mercy has a director of education that does this, University of Maryland is based on their specific criteria, St. Joseph's is different and Upper Chesapeake doesn't do them anymore. All agreed that the program is not qualified to make these determinations; however, Rhande is extremely careful and will not hesitate to contact anyone with questions. The issue is that every site has different criteria and expectations, so the program cannot possibly keep up with. Susan Landry confirmed that if someone has something out of the ordinary of concern, she or an advisor are notified at CCBC.</p> <ul style="list-style-type: none"> ○ Erin thanked everyone who donated barium and BE bags. 	<p>Deb Windsor will follow up with Erin or Rhande regarding MedStar Good Samaritan/Union's background check policies.</p> <p>Erin needs information on who approves students for each site so she can update Castlebranch's directory.</p> <p>If there are any donations of expired procedure trays, HSGs, etc. please send them with students. We appreciate it.</p>
<p>Advanced Modality Programs Updates</p>	<ul style="list-style-type: none"> ➤ Deb Lam reported numbers are down. She has 7 MRI students, 5 CT students and 3 Mammo students. We had 7 that started in January, 4 finished and 3 dropped out because it was too overwhelming. Two came back and are finishing up now and the 4 that finished just took their boards. So, Deb made the application process a little more stringent for the radiography students who want to take the CT program during their send 	<p>If there are any incentives, job openings for our CT, MRI or Mammo programs please let Deb Lam know so she can pass it onto her students.</p>

year for the next cohort; they must have a certain GPA and be at a certain point with their comps. Erin gives them 8 hours for CT clinical duty, so they only must use 4 hours of their own time and Deb decreased the clinical hours with CT to 12 hours/week. New CT classes start in January, Mammo will start in spring, and the current MRI students graduate in May and a new cohort will begin in the fall.

➤ Medical Assisting in Imaging:

- A new class will begin in January and Deb has made it very easy to schedule, with synchronous asynchronous, not having to be on campus and flexible clinical hours. There are flyers to take and a virtual information session for all Advanced programs on Nov. 7th. The newest endeavor is a collaboration with the Medical Assisting program and is called the Medical Assisting Tech Aid. Deb's idea is to make this person a viable part of the imaging team. They can start IVs, do history taking, patient prep, etc. So halfway through their Medical Assisting training, students can decide to take this imaging path and it is all online. Deb sends them for 40 hours of clinical where they are trained in CT and MRI. Her Basic Medical Imaging for the Health Care Professional course goes through everything, 2 modules of safety including radiation safety; internal and external patient prep; exam orders and informed consents. There is a whole module on communication, history taking, exam questions, and the basics of contrast. It is a 20-hour course, and this will start in November with 1st round of clinicals to begin in January. After completion, there is no certificate since it is through ConEd but it will show on their transcripts that they completed this course. It is approximately a \$229.00 fee for this course and the Medical Assisting program is around \$7,000.00 but offers many grants. Donna

We will make a flyer for the Medical Assistant in Imaging program with registration information and information session dates and times and send it to our board members to pass on.

	<p>Rowan, the Director of the Medical Assisting program at CCBC, has informed her students and we already have had 4 interested people reach out to Deb.</p> <ul style="list-style-type: none"> ➤ Erin discussed a new Phillips initiative to create a Cardiovascular “Task Force.” A budget was submitted to Phillips, but there is no follow up from Phillips at this time. So, we are in limbo as far as developing a Cath Lab course through Continuing Education. But interested parties did meet in September with Erin, and this is something exciting that we are looking forward to in the future once we hear back from administration and Phillips. 	
<p>Clinical Facilities Updates</p>	<ul style="list-style-type: none"> ➤ Advanced Radiology reported they are still short-staffed. Just about all CT equipment has been replaced. ➤ Medstar Franklin Square’s new Cath Lab and IR unit will be opening in May; a CT unit has been approved and a new portable is coming November/December. They are now servicing MRI 24/7. They have 3 full time, 1 part time, and several PRN openings. ➤ Mercy Medical Center reports a new Fluoro room in the works. ➤ GBMC stated they have a lot of construction on campus including the new cancer center, and a new IR unit. They have some overnight positions and 1 for x-ray. ➤ MedStar Good Samaritan has a new IR suite opening November 13th with 2 part time overnight positions and 1 IR position currently. In x-ray, there is a FT position opening (Friday, Saturday, Sunday) and a part time position (Friday, Saturday) 12-hour shifts. ➤ Medstar Union Memorial has 1 FT evening shift and will have an overnight spot coming up soon. They are still waiting for new equipment requests to process. ➤ Medstar Good Sam/Union IR has openings in 1 FTE for IR: 2 FTEs for CT both overnight (4 10s Tuesday – Friday and 3 12s Saturday, Sunday, Monday) ➤ Johns Hopkins Cath Lab just hired 2 new techs and still has 5 open positions but still have anywhere from 30-50% vacancies. 	

	<ul style="list-style-type: none"> ➤ Patient First just opened their new Annandale, VA location with several x-ray openings at all centers. ➤ Northwest nothing has changed much since March; they are very busy and have various positions still open. 	
Class of 2024 Representatives	<ul style="list-style-type: none"> ➤ Dylan Coleman and Noah Ford are the Class of 2024 students here today with a few things to mention. Their request is for a student computer log in, and Jen Falavigna mentioned that her site has a computer in the back area that they can possibly use. They could then work on their performance objectives and look up patients, etc. for familiarity. The students would also like to see some new sites. There is an issue with student badges, access to the areas they need to get to and do not always work, which hinders them getting to clinical areas. There was a suggestion of a specific badge for CCBC students with a photo that is turned in when clinicals are finished. The students also need scrub access. 	Addressing student badge issues and scrub access for the future.
Additional Board Issue (not on agenda)	<ul style="list-style-type: none"> ➤ Erin left one issue off the agenda that the board needs to decide. How many students will we take in the next Radiography cohort? We have 25 graduating in May and 41 1st year students currently. Once we satisfy the diagnostic needs, then more people will go into the advanced modalities, but it will take a while. But the board must think about 2 ½ years down the road and how many we take for that cohort. Sites have reported many techs retiring or about to retire, which will add to the void that already exists. It was suggested to accept larger cohorts, maybe two more times because this is a regional problem across all sites. It was suggested that we do high school fairs to introduce high school students to this profession and what pathways and opportunities are out there. The general consensus was at least one more large cohort, if not two. 	

Respectfully submitted,

Name: Sally Sawyers

Date: 11/1/2023

2023 Spring Advisory Board Minutes 3.23.23.pdf

Uploaded by: Erin Phelan

Position: UNF



Medical Imaging Programs Advisory Board Meeting

Date: March 29, 2023

CCBC Representatives: Erin Phelan, Debbie Lam, Rhande Meggett, Rick Svoboda, Jessica Shirkey, Alison Nantz, Brandy Jones, Kateryna Paunic, Marina Faybusovich, Susan Landry, Dr. Diane Flint, Donna Rowan, Sara Lillard

Student Representatives CO2023 Representatives: Sydney Ollinger, Class 2024 Class President and Rachel Beichler, Class 2024 Treasurer

Off-Campus Members: Shannon Carter (*Medstar Franklin Square*), Rich Forton (*Cook Medical*), Chuck Hush (*Upper Chesapeake, Harford Memorial*), Shelley Young (*Upper Chesapeake*), Lisa Ziegler (*Upper Chesapeake; Harford Memorial*), Sharon Ackerman (*Ascension St. Agnes*), Shelly Young (*Upper Chesapeake; Harford Memorial*), Fitzhugh Alford (*University of MD Midtown*), Adrienne Haney (*GBMC*), Kelly Cannavale (*St. Joseph Medical Center*), Heather Broomall (*Patient First*), Deb Windsor (*MedStar Good Samaritan/Union Memorial*), Jennifer Falavigna (*Union Memorial Hospital*), Kelly Kunze (*Advanced Radiology*), Stephanie Kaldis (*MedStar*), Chris Mielke (*Mercy Medical Center*), Erica Pullins (*Johns Hopkins Cath Lab*), Adia Johnson (*Northwest Hospital*)

Topic	Discussion	Action/Recommendation
Welcome/Introductions	All attendees introduced themselves and their roles. Erin Phelan welcomed and thanked everyone for being in attendance.	
Radiography Program Updates	➤ Announcing new partnerships with St. Agnes Hospital and new Advanced Radiology sites (Annapolis, Ellicott City, Fisher, Quarry Lake, Seven Squares, Timonium). We are working on Northwest (finalized soon.) We do not have the hospital but have acquired Mercy sites at Overlea and Lutherville, contracts were just signed. Our brand-new partner for clinical rotations is Patient First, with contract underway. There has also been a big discussion about getting into University of Maryland downtown who have agreed to portables and OR.	Board approved meeting Minutes from Fall 2022.

	<ul style="list-style-type: none"> ➤ Approval of fall 2022 meeting minutes; any changes please let Erin know. ➤ The JRCERT site visitors visited Union and Franklin Square for the site visit on December 1-2, 2022. ➤ JRCERT Report Findings <ul style="list-style-type: none"> ○ We had our JRCERT site visit on December 1-2 and we had no citations whatsoever. The next JRCERT committee meeting will be in the spring where they will vote on our number of accreditation years and give us our next award. So, the next one will probably be in 8 years. 	
<p>Curriculum Changes</p>	<ul style="list-style-type: none"> ➤ The curriculum changes to possibly start Fall 2024 (Class of 2026): <ul style="list-style-type: none"> ○ RADT 105 (Fall)/125 (Spring) <ul style="list-style-type: none"> * Changing from 1 credit, 13 weeks to 2 credits, 15 weeks * We will make them 2 hours instead of 1 ½ hours on Fridays. *Adding in more time and activities for students such as Osteology Labs and concepts and hands-on positioning. ○ Erin showed the two common course outlines for CSIT 120 and 101. CSIT 120 is a combination of Technology and Diversity. We have room to allow students to choose any variety of diversity courses here. While CSIT 101 is a computer basics course and because this is a technological field it is important. So, the question is, should we make this a prerequisite course so that students must take this course specifically? ○ Erin went over the Curriculum Changes Timeline as a review. ○ The board approved these changes. 	<p>Board approved that students can choose any diversity course, and CSIT 101 should be a prereq vs. a gen ed course.</p>
<p>Program Updates</p>	<ul style="list-style-type: none"> ➤ We added Observation Days again. Erin asked how everyone feels that is working? This must be in any hospital in the US. It is 6 hours and cannot use Advanced Radiology because it must be a hospital so students become familiar with what they will be doing in the program. Check websites for Volunteer Services and Education Departments. This is graded and is part of the admission points (the form has a rubric on the back.) Students are responsible for mailing or dropping off the form off to the program, feedback from 	

	<p>students has been nothing but positive. It must be 6-8 hours and usually is one place but can be more with an informative 15-minute video provided about what the students can expect.</p>	
<p>Radiography Program Updates</p>	<ul style="list-style-type: none"> ➤ Admissions <ul style="list-style-type: none"> ○ We are trying to expand the program which is why we are adding new partners. We need to know how many students can be taken in each rotation? Is there enough work? ○ As of today, there are 35 verified applications and 95 total applicants who had not paid yet. We will know more after spring break. But now that things are opening back up, clinical placement should not be a big issue. We are not proposing a large cohort every year or flooding the market, but we need students who have graduated working in diagnostic radiography and some moving on to advanced modalities. Getting more students out in the field can increase our admission rates for MRI/CT. ○ Class of 2025 will be our largest with up to 50 students. ➤ Philips Donation/Continuing Education Opportunities <ul style="list-style-type: none"> ○ Philips contacted Erin with the possibility of donating money to satisfy the critical Cath Lab tech shortage by promoting the Radiography Program with the mindset that more will hopefully want to advance to the Cath Lab field. Erica Pullins from Hopkins has also contacted Erin about the same issue. ○ Obviously, ramping up Radiography admissions is a way to start. One idea is to create a Cath lab course in Continuing Education and hire someone new for that. Possibly do a marketing campaign for Baltimore County, Baltimore City and parts of Harford County to support students in disadvantaged areas with the possible Philips donation. The proposal has been accepted but we need more seats and more clinical rotations for this Radiography Program Expansion project. ○ Debbie was approached by RadNet to create a CCBC Medical Imaging Pathway for tech aides. We are working 	

	<p>with Donna Rowan in Medical Assistant Program to start a course for their program on the basics of medical imaging. Then there will be clinical rotations at Advanced Radiology.</p> <ul style="list-style-type: none"> ○ Rotations sites are needed for 1 student, 80 hours for 2 weeks in a row. <ul style="list-style-type: none"> ➤ Imaging Process Vs. Pretest <ul style="list-style-type: none"> ○ Member vote- delete imaging process and add a Pretest instead; any tech could do the pretest (same form, same requirements); no failing. ○ Minimal “training” on-line video for techs ➤ Yearly Clinical Instructor Workshop <ul style="list-style-type: none"> ○ Successful workshop first time in person since pandemic ○ Hopefully doing this on-line with modules; refreshers and give ASRT credits. ➤ CI Training on CertCentral <ul style="list-style-type: none"> ○ Rhande is thinking of offering clinical instructor trainings on campus in the classroom when it is opened vs. her traveling to train all new clinicians. ○ She will still do Zoom and travel to sites as well. ➤ Evaluate Updated Roles <ul style="list-style-type: none"> ○ Need Clinical Instructor, Staff Tech and Personal Records Manager roles added. ○ Changes to viewing student records and students’ schedules. ➤ CI Evaluation Process <ul style="list-style-type: none"> ○ JRCERT language has changed so that we don’t have to evaluate techs anymore. ➤ Lab Update <ul style="list-style-type: none"> ○ Hiring a new position for Rick’s old job, working in advanced modalities and some radiography also. ➤ SimCapture <ul style="list-style-type: none"> ○ Videos for training and remediation of students while they are positioning during lab. 	<p>Board members will get feedback from their staff regarding implementing the Pretest vs. Imaging process and we will start this in the fall.</p>
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<p>Advanced Modalities Program Updates</p>	<ul style="list-style-type: none"> ➤ CT Dual Enrollment <ul style="list-style-type: none"> ○ Lower numbers in CT and Mammo ○ Debbie proposed 6 months of school to be dual enrolled in CT and graduate in May. Radiographers would graduate at the end of June for CT. Six students were interested in this pilot program and are doing well in CT. Clinical hours were decreased, classes via Teams and during the 6 months they only come to campus one time which all helps to make this accessible to students. ○ Next class starts in July for that cross training and the new MRI cohort begins in August. Mammo is going great as well. ➤ We talked about getting paid for Clinical duty. It was decided that CCBC will not be doing this. 	
<p>Clinical Facilities Updates</p>	<ul style="list-style-type: none"> ➤ Upper Chesapeake has an intern position as a trial; students must be enrolled in the Radiography program. FT evening and day positions available and some YR II students are interested. ➤ Upper Chesapeake/Harford Memorial have several openings for technologists. Alison Conway resigned as imaging director. ➤ Aberdeen is slated to open as well as Harford Memorial closing in January 2024. ➤ UM Midtown has added a new CT unit; PRN positions. ➤ St. Agnes has added PRN slots; possibly adding the outpatient center as a clinical site in the future. Opening a full-service site in Howard County soon. ➤ GBMC has 1 FT vacancy; will take another Fluoro students; OR ramping up. Lots of growth on campus (a new 60-bed building opening soon), and a new cancer center opened. ➤ Saint Joseph Medical Center has CT positions; 2 new scanners. ➤ Patient First are doing pretty well in regard to staffing but they are looking to expand again with some new facilities in DC and VA areas. ➤ Union is still struggling with staffing and there are some FT and weekend positions available. Alison Conway is coming on board as Assistant Vice President for Imaging Services for Medstar. 	<p>CCBC will need a new affiliation agreement with UCHS Aberdeen location before 2024.</p>

	<ul style="list-style-type: none"> ➤ RadNet is getting new CT scanner; transitioning offices in Columbia and Fleet Street from American to Advanced; still working on staffing issues and shift adjustments to keep sites open. ➤ Franklin Square has 14 PRN positions and are fully staffed. ➤ MedStar Urgent Care has a new location to start next year in VA; they are expanding across the region. ➤ Mercy has a big upgrade project in their MRI suite; Getting a new SPECT CT in nuclear medicine, new vascular lab and IR. Opening offices in Hunt Valley and Reisterstown. ➤ Johns Hopkins Cath lab is struggling with staffing shortages. RCIS's are being hired as travelers, but they know very little about everything else. ➤ Northwest has 9 travelers and 1 in IR which is ending. CT overnight position opened; possibly some x-ray positions opened and approximately 15 PT positions opened across 3 sites. 	
Class of 2024 Representatives	<ul style="list-style-type: none"> ➤ Things are going well in Class of 2024. We lost 4 students so far for various reasons. Clinical is going fine and students are getting images and improving on their skills. ➤ Student badges are needed to move within the hospitals and parking is an issue. Students passes or discounted parking would be great and alleviate issues for our students. ➤ Union and Franklin Square have had great feedback, as well as Good Sam. ➤ In difficult situations, it would great if students would be allowed to try the position or try to help the patient without the tech just taking over. ➤ Techs need to value the importance of the student evaluations and need to stay on top of them and hopefully give feedback in comments. 	
ETC.	<ul style="list-style-type: none"> ➤ The Radiography Program is turning 50. We will host an Open House with raffles, Power Point with photos and celebrations. 	

Respectfully submitted,

Name: Sally Sawyers

Date: 10/2/2023

Advisory Board Minutes - Fall 2022 (2).pdf

Uploaded by: Erin Phelan

Position: UNF

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued



Medical Imaging Programs Advisory Board Meeting

Date: October 19, 2022

CCBC Representatives: Erin Phelan, Debbie Lam, Rhande Meggett, Rick Svoboda, Jessica Shirkey, Deborah Johnson, Brandy Jones, Alison Nantz, Kateryna Paunic, Susan Landry, Sara Lillard, Diane Flint, Asst. Dean, SHP, and Shawn McNamara, Dean of Instruction, SHP.

Class of 2023 Representatives – Samantha Sullivan, 2023 Class President and Melissa Carlson, 2023 Class Vice President

Off-Campus Members: Heather Broomall (*Patient First*), Shannon Carter (*Medstar Franklin Square*), Adia Johnson (*Northwest Hospital*), Natalie Majewski (*ExpressCare*), Adrienne Haney (*GBMC*), Shelley Schenning (*Advanced Radiology*), and Kelly Kunze (*Director of Clinical Services for Advanced Radiology*).

Topic	Discussion	Action/Recommendation
Welcome/Introductions	➤ All attendees introduced themselves and their roles. Erin Phelan welcomed and thanked everyone for their vital membership on the Advisory Board.	

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

Topic	Discussion	Action/Recommendation
<p>Clinical Facilities Updates</p>	<ul style="list-style-type: none"> ➤ Adrienne Haney with GBMC is looking for more comp testers for students. ➤ Shannon Carter states there is a new supervisor, Ryan Nichols at Franklin Square. Under construction for a 3T MRI scanner. Have started elective cardiac cath procedures and have started building a new cath lab in the old OR. Staffing is better in all departments except for CT. ➤ Natalie Majewski states they have openings at all locations. A new location is opening next year in Ellicott City. ➤ Adia Johnson from Northwest states that there are several positions open in X-ray, CT, and IR. They have approved students to be able to be cross trained in CT and IR on-the-job. 	<p>Adrienne will reach out to Rhande about CI training.</p>
<p>Review of April 2022 Advisory Board Minutes and Action Items</p>	<ul style="list-style-type: none"> ➤ “New curriculum with CO22 should raise the average mean scaled score. Keep an eye out for that. And “Information about site visits will be updated later in the summer or fall.” Will be discussed in meeting agenda. ➤ “Keep a lookout for more RADT 101 feedback.” Did not receive any feedback on the new prerequisite course. Seems to be going very well. ➤ “Hospital observation sessions are better. Other facilities agreed to participate. Erin and Susan Landry to discuss the process for next year’s cycle and will give an update later in an email.” Hospital observation session info has been rolled out to the first group of RADT 101 students. Email sent by Erin Phelan in June stating we will be going back to hospitals, and prospective students can choose any single hospital and go through volunteer services. Erin showed the observation evaluation form and the video instructions that are sent out to perspective students. ➤ “Next cycle will be the LAST to require Physics 101 as a prerequisite. Erin to update all interested parties at CCBC, including the Advising and Physics department, for pipeline students. Update RADT 101 to reflect changes.” Will be doing that for the admission 	

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<p>deadline of April 15, 2024, not 2023. Will update RADT 101 to reflect changes in admission requirements. CCBC Academic Advising and Physics departments have been notified.</p> <ul style="list-style-type: none">➤ " Send Erin any suggestions for CEU needs." Nobody has sent in any suggestions but keep this in mind.➤ "Erin to update Board after more talks with the Continuing Education department." The MA imaging assistant will be discussed in today's meeting.➤ "If any clinical location will be expanding pediatric units or services in the future, please remember that Radiography students need more peds training." Have not heard any updates from any clinical sites about expanding pediatrics.➤ "Clinical sites to send out reminders to all CIs, that all students need to present Black Books and Lab Manuals when imaging and comping." Hopefully, everyone went back after the last meeting and sent out these reminders.➤ "Send the program a message when a JRCERT-approved clinical instructor resigns, so we have as much advanced notice as possible to train someone else." Erin reminded everyone that if there is no JRCERT-approved clinical instructor at a small site, we cannot send students to that location.➤ "Rick to consult with Adrienne about replacing mastoids with cochlear implant and shunt views." They have not had the chance to speak about this since April.➤ "Remind technologists that we have 1 credit, Registry Review online courses in CT and MRI for CQR purposes." Hopefully, everyone sent out reminders to staff about these courses.➤ "Clinical sites need to look at suggested remedies to increase interest in attracting new CT/MRI techs." and "Advanced Imaging will be very flexible with required clinical hours and managers who want to hire students, if students stay in the program." Will discuss in today's meeting.	<p>Let the program know when any CI resigns so that we can comply with JRCERT standards.</p> <p>Rick and Adrienne to consult about new views.</p> <p>Take a look at the new CCBC Medical Imaging ad in <i>The Scanner</i>.</p>
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Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<ul style="list-style-type: none"> ➤ “Erin to inquire what other SHP programs do for employee-specific clinical rotations and will search accreditation standards.” Erin updated the Board that her research showed that most programs separate student clinical duties from paid work completely. ➤ “Send any old photos of previous classes to Erin for Anniversary celebration. Have not received any old photos as of yet. ➤ “Any clinical sites changing their stance on tattoos? Erin will send out an email asking if there have been any changes in the uniform polices. She asked the attendees remaining to let her know of any of these changes.” Nobody has any changes in uniform policy and tattoos need to be covered up. ➤ Debbie Lam approved minutes and was seconded by Diane Flint. 	
<p>Updates on CO2022</p>	<ul style="list-style-type: none"> ➤ First class with new curriculum. ➤ They took the Registry right away. 100% passed on first attempt. ➤ Retention rate: 100% of them that started the program and 18/18 graduated. ➤ 17/17 Got a job within the first three months. One was going to the MRI Program. 	
<p>Outcomes Assessment Data Review</p>	<ul style="list-style-type: none"> ➤ Erin reminded everyone that the Class of 2022 was start of new curriculum and that she started a new comparison chart. ➤ Brought up both comparison charts: old and new curricula ➤ The Assessment Plan itself has not changed. ➤ Goal #1: Students will be clinically competent. ➤ 1A1 and 1A2: <u>Students will demonstrate positioning skills</u>. Meeting benchmark. Lab has always been an issue with students skirting the benchmark, but two things improved their scores in lab: 1. Starting with the Class of 2020, we stopped having students memorize techniques for lab testing since that’s all they focused on and not the actual positioning. That helped. And 2. Our data we were pulling from EValue was incorrect. The math in EValue did not match our math on the forms, for all lab, image, comp, and clinical evaluation forms. We corrected the data and changed all 	

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<p>assessment plans and the comparison graphs to reflect the errors. After correction, scores shot up.</p> <ul style="list-style-type: none">➤ 1B: <u>Students will select appropriate technical factors.</u> 1B1 with the RADT 123 Tests 1-2. With the advent of the new curriculum with Class of 2022 and with the mandated use of RadTechBootCamp, the average test scores have risen. Met benchmark. 1B2 with the comp form – benchmark met.➤ 1C: <u>Students will demonstrate knowledge of and practice radiation safety.</u> 1C1 with 206 final exam, again, the new curriculum has expanded this course in length and has new textbook. Scores are up. 1C2 with comp forms, consistently meeting benchmark with this tool.➤ Goal #2: Students will use critical thinking skills.➤ 2A: <u>Students will manipulate technical factors for non-routine examinations (i.e.: portables/ or/trauma/Pediatric).</u> 2A1 with comp form, consistently meeting this benchmark. 2A2 with trauma lab form, scores are better starting with Class of 2020, which correlates to the ending of students memorizing techniques.➤ 2B: <u>Students will evaluate images.</u> Both tools have shown students consistently meeting benchmarks.➤ Goal #3: Students will communicate effectively.➤ 3A: <u>Students will demonstrate effective written communication skills.</u> With 3A1 and 3A2, students consistently meeting benchmarks.➤ 3B: <u>Students will use effective oral communication skills.</u> 3B1 with Film Critique presentation, students consistently meet this benchmark. 3B2 with Employer Survey Form, students consistently meet this benchmark with a result of Good or Excellent. However, the January 2022 survey for Class of 2021 was only answered by 3 people, despite survey being sent out a few times and an email warning.➤ Goal #4: Students will evaluate the need for professionalism.	<p>Please respond to the Employer Survey for each graduating class every January. This is accreditation data which is valuable for the betterment of the program.</p>
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Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<ul style="list-style-type: none">➤ 4A: <u>Students will demonstrate professional behavior</u> with questions on clinical evaluation form. CO21 did not meet benchmark. This was last class with old curriculum. Also, everyone who applied for this cohort got admitted due to low application numbers. A few students were not strong. CO22 did meet benchmark. CO23 only has first year numbers returned and will have to wait for RADT 221 for complete score. Clinical Coordinator has been training CIs to be very honest on clinical evals.➤ 4B: <u>Students will understand professional ethics</u>. Changed the tool with CO22 from questions on a test to a Case Study assignment, which fits nicer. With either tool, students consistently met benchmark.➤ Goal #5: The program will constantly measure its effectiveness in graduating entry level technologists.➤ 5A: <u>Competent students will complete the program</u>. Erin stated that she has been measuring the retention rate incorrectly over the years. She has been including every student who has left the program for any reason, against the total number of students at the end of 3rd week of first semester. JRCERT does not require including students who leave for “financial, medical/mental health, or family reasons, military deployment, change in major/course of study, other reasons an institution may classify as a nonacademic withdrawal.” Even with this error, the retention rate has always been strong, with current 5-year average at 88%. Starting with the CO21, non-academic withdrawals were not counted, and the rate went up. CO22 is 100% as all 18 graduated.➤ 5B: <u>Graduates will pass the ARRT Registry certification on the 1st attempt</u>. CO22 is 100%. 5-year average is 93.6%. Met benchmark.➤ 5C: <u>Students will score at or above the national average on the ARRT Radiography Exam</u>. Consistently not meeting this benchmark over the years. However, with CO22, new curriculum included using RadTechBootCamp for Registry review and having a Mock Registry exam in Testing Center as an actual grade. End-of-year 2022 data	<p>Expect higher retention rates in the future.</p> <p>Expect CO22 to meet the benchmark.</p>
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Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<p>from ARRT has not been posted yet, but CO22’s average score was 88%, which is very encouraging to meet this benchmark.</p> <ul style="list-style-type: none"> ➤ 5D: <u>Employers will be satisfied with educational preparedness of graduates</u>. Consistently meeting this benchmark. ➤ 5E: <u>Students will express satisfaction with the radiography program, with answers of Good or better</u>. From Exit Interviews, CO22 was 100%. Consistently meeting this benchmark every year. ➤ 5F: <u>Of those seeking employment, graduates will obtain employment</u>. Consistently meeting benchmark. Response rates have been good recently. Erin reaches out with Survey Monkey and through Facebook Messenger. 	
<p>Admissions (Susan Landry)</p>	<ul style="list-style-type: none"> ➤ For CO24, number of verified applications was 85. 69 applications were considered with points. Number of Accepts = 30 applicants. Others denied for not having prerequisites, missing paperwork, low scores. ➤ TEAS score is based on overall score, no cutoff Reading score, although Erin may consider this in future. Students agreed that the Reading score was very important. 	<p>Landry to investigate reading scores for past 5 years. Erin to come back with update to Advisory Board when data has been analyzed.</p>
<p>Marketing Efforts (Susan Landry)</p>	<ul style="list-style-type: none"> ➤ Eustis Building directory updated with room numbers. ➤ Programs received large banners for room identification. ➤ New poster at entrance to doors containing program information cards. ➤ Have restarted CCBC SHP social media pages. ➤ Working on producing videos for all programs’ websites. ➤ Have started face-to-face college fairs. 	
<p>JRCERT Site Visit</p>	<ul style="list-style-type: none"> ➤ JRCERT will be here on December 1-2 for accreditation site visit. ➤ They will be visiting MedStar Franklin Square and MedStar Union Memorial Hospital. ➤ Will interview clinical preceptors here on campus from MedStar Good Samaritan Hospital, MedStar Harbor Hospital and MedStar Orthopaedic Institute. 	

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<ul style="list-style-type: none"> ➤ Erin has talked with Deb Windsor, Shannon Carter, and Kevin Kelly about site visit. 	Erin to reach out to Kim Krug regarding Harbor Hospital.
Simmons Scholarship	<ul style="list-style-type: none"> ➤ Dr. Thayer Simmons from RadNet generously has donated money to start a new scholarship for Radiography students. The first recipients will be chosen this Spring and next Fall and will receive \$500.00 each. 	
RADT 224 – Radiography Seminar	<ul style="list-style-type: none"> ➤ The final didactic course which has been run once with CO22. ➤ The professional piece of program with professional development and Registry review. ➤ Topics include starting first radiographer job, employer expectations, supervising students, and soft skills. ➤ Erin sent out email to clinical supervisors asking for advice on employer expectations and received no replies. 	Send Erin topics you would like to see included in this course.
IR/Cath Labs needs	<ul style="list-style-type: none"> ➤ Erin was contacted by a company called Total Impact Investment firm. They work for Philips, and they are looking to either fund or partially fund anything that would help IR, especially cardiac catheterization lab needs/shortages. ➤ Shannon states they are open to hiring RCIS, as fluoroscopy is being used under the supervision of a physician, but she stated that getting IR techs trained in specialty areas would help with shortages. ➤ Discussed elective rotations with Radiography students in IR and one IR/Cath lecture in RADT 207, as ways to drum up interest in area. ➤ Should CCBC start a new program for either RCIS's or RT's only in IR and Cath? 	Advisory Board to think on best way to move ahead to help with staffing shortages in this area.
Clinical Updates	<ul style="list-style-type: none"> ➤ Clinical Instructor Meeting will be in-person this January, for first time in 3 years. In afternoon with lunch provided. Will contain 3 ASRT CEUs. ➤ Purchased software called Cert Central for CI training purposes and any ASRT CEU programs we want to create. ➤ Continuing need for comp testers on all student shifts. 	<p>Keep an eye out for CI meeting invite. Consider sending one CI per clinical site.</p> <p>Reach out to Rhande with comp tester recommendations.</p>

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

	<ul style="list-style-type: none"> ➤ MD’s new concealed carry law was discussed. A Radiography student came across a patient on clinical duty that was carrying. Asked clinical partners for advice. Kelly from Advanced said they have a No Firearms policy at all locations, but they don’t screen for this. Hospitals did not comment. 	<p>Reach out to program with any updates on MD’s Concealed Carry Law and firearm policies. Need to educate students that they may come across situations on clinical duty.</p>
<p>Advanced Modality Program Updates</p>	<ul style="list-style-type: none"> ➤ We have graduated 33 CT techs and 24 MRI techs and 42 Mammography techs. ➤ The current CT class graduates at the end of December and all the graduates have already been spoken for. ➤ Piloting 12 hours a week clinical rotations for CT this January, instead of 16 hours. Maybe this will increase the student numbers and make it look more attractive. Will increase flexibility of rotations. ➤ Discussed Nuclear Medicine Technologists and Radiation Therapy Technologists applying for the CT program. ➤ Any nuclear medicine tech would go through the ARRT requirements because not everything required for NMTCB is covered by CCBC. ➤ Most mammography students do clinical rotations at Advanced Radiology. However, Mercy Hospital is requested as a site also. 	
<p>Medical Imaging Assistant/Virtual Assistant</p>	<ul style="list-style-type: none"> ➤ Updates on creating a Medical Imaging Assistant program in combination with Continuing Education to create a new job designation in MD which would replace a Tech Aide with a fully licensed Medical Assistant. ➤ In discussions with Donna Rowan of CCBC Medical Assistant Program to work on a job description or list of skills. ➤ Would have to include a 20-hour IV Therapy course and clinical rotations at imaging sites. ➤ Interest from hospitals as well. 	<p>Erin, Debbie, and Kelly Kunze to meet about this topic.</p> <p>Erin and Debbie to provide Donna Rowan with a specific list of skills.</p>
<p>Class of 2023 Representatives (Samantha Sullivan,</p>	<ul style="list-style-type: none"> ➤ Need for more Comp Testers and more Imagers on site. Suggested allowing students to burn CD’s for Images to take to the college. That would alleviate some of the problems with lack of staff. 	

Medical Imaging Programs Advisory Board Meeting

Date: October 20, 2022 - continued

President and Melissa Carlson, Vice President)	<ul style="list-style-type: none">➤ Students would like to see an updated badge system. Currently students must set up an appointment and go to Upper Chesapeake the day before they start to pick up their badges. This wastes a lot of time commuting.➤ Were promised dummy badges to make movement throughout the hospital easier, but this has not happened.➤ Would like to have student parking passes.➤ Students expressed their appreciation for faculty and CCBC working with them to make changes and inviting them to the meeting.	
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Described by:

Name: Deborah Johnson

Date: 10-24-2022

CCBC Radiography 86 Applications.pdf

Uploaded by: Erin Phelan

Position: UNF

- ▼ Applicants
- Search
- Search Assignments
- Search Interviews
- Clipboard
- In Progress Applicants
- On Hold Applicants
- Undelivered Applicants
- Search Correspondence
- ▶ Applicant Lists

Search Applicants

Active Filters: Designation equals 'XRAY 2024'
86 applicants

Hide Filters

Search Actions ▼

Sort Results ▼

Last Name	<input type="text"/>	Application Status	<input type="text" value="▼"/>
First Name	<input type="text"/>	Local Status	<input type="text" value="▼"/>
Student ID	<input type="text"/>	Decision Code	<input type="text" value="▼"/>
SHP CAS ID	<input type="text"/>	Designation Submitted	<input type="text"/>
State/Province	<input type="text" value="▼"/>	Date	<input type="text"/>
Email Address	<input type="text"/>	Designation	<input type="text" value="▼"/>
State of Legal Residence	<input type="text" value="▼"/>	Application Last Changed	<input type="text"/>
Start Term	<input type="text" value="▼"/>	On	<input type="text"/>
		Reviewer	<input type="text" value="▼"/>
		Preferred Phone Number	<input type="text"/>

Search

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Review the [Searching for Applicants](#) documentation in the [WebAdMIT Help Center](#) for more information on how to work with this feature.

Phelan Original Klausmeier Letter SB0830.pdf

Uploaded by: Erin Phelan

Position: UNF

906 Cherry Hill Road
Street, MD 21154
ephelan@ccbcmd.edu
443-840-2807
February 26, 2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine
Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

My name is Erin Phelan, and I have been a licensed radiographer for 34 years and a radiography educator for the past 18 years. I strongly oppose Senate Bill 0830. Not only is it dangerous to the health of all Marylanders, but we have also been working on far better solutions to the radiographer shortage in our area.

My program's advisory board consists of all local employers, including LifeBridge, University of Maryland, Medstar, and others. Not once did these institutions suggest limited scope techs. What was suggested was to increase enrollment as much as possible, which we accomplished by establishing 25 new clinical placements for radiography students. Last fall, we increased our incoming cohort from the pandemic classes of 18 students to 41. Moreover, in 2021, we created an Introductory radiography course which serves at least 150 college students a year, to get them interested in the radiography profession. This online, asynchronous course is very popular and almost anyone can take it. Since its inception, 261 students have passed this course.

Another initiative we have been working on with Advanced Radiology is to train Medical Assistants as advanced "tech aids," who can interview patients, help them with exams, and provide patient care. We currently have medical assistant students in clinical rotations for this cooperative enterprise as a pilot program. Radiology-specific tech aides and Radiography program students are extra pairs of hands in busy departments and increasing the amount of each are tantamount to alleviating the shortage, as is bringing back temporary licensure.

Our efforts over the past few years are safer and wiser solutions than the proposed bill, which will only take away applicants to radiography programs and create an even worse shortage. The need for qualified radiographers in CAT scan, MRI, and mammography is even greater than urgent care centers, and this bill will reduce the number of people able to perform your next mammogram.

I am writing to express my strong opposition to SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation poses significant risks and challenges that must be addressed.

The State of Maryland does not need the profession of Limited Licensed Radiologic Technologist. While other states have larger rural areas, our state has many educational programs that can address radiologic technologist shortages when they occur in a cyclical nature over the years. I strongly believe that the introduction of such a job category will introduce significant danger to the community. Here is why:

1. Limited Licensed Radiologic Technologists are trained in about a quarter of the time that licensed Radiographers are. This results in a decrease of skills in delivering ionizing radiation to the public. Since the availability of CT in hospitals and offices has increased over the years, the amount of radiation delivered to patients has increased dramatically. Limited Licensed Radiologic Technologists will increase the amount of radiation to patients significantly, as skills needed to become competent in radiography take eighteen months to two years. Many repeat x-rays will be taken. For example, ambulance drivers do not have the scope of practice to deliver narcotics to patients, and certified nursing assistants are not allowed to deliver medication, but Limited Licensed Radiologic Technologists will be allowed to deliver harmful ionizing radiation to patients?
2. Employers have created their own radiographer shortages over the past few years. Some hospitals limited or blocked clinical rotation experiences for radiography students during the COVID years. In turn, radiography programs were limited in the number of students admitted, which decreased the number of radiographers graduated into the community. The Community College of Baltimore County has been working tirelessly in admitting more students since 2023, by doubling the number of clinical rotation experiences. The CCBC Medical Imaging Advisory Board just voted in October 2023, to keep up the high numbers of admission for at least another two years to circumvent the radiographer shortage. We are already working on solutions.
3. Employers also are not keeping up with radiographer salaries. Young graduates particularly are chasing the money and are not being attracted to hospitals and

offices that are not raising salaries, even with record-breaking profits for mega healthcare corporations.

4. The proposed bill states, "Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body." All x-ray machines are the same and can deliver harmful amounts of radiation to patients. With limited training on such machines, the harm to the community is real. 15 clock hours of radiation protection education is not sufficient to protect patients. CCBC Radiography students receive over 75 hours of radiation protection education, for example.
5. We have a mechanism for licensure for radiography in this state already. If you open the door for the job category of Limited Licensed Radiologic Technologist, you can never close it. These less-trained workers will be able to perform about 50% of the studies that are currently designated to be performed by a licensed radiographer only. Outpatient and urgent care centers will never hire a full radiographer if they can hire a Limited Licensed Radiologic Technologist. Even hospitals will hire less radiographers forever more. Job opportunities for radiographers will decrease and will never recover after the shortage is over. Radiography programs will never be at full capacity as they once were. This will decimate the radiography profession in Maryland, a profession that takes three years of comprehensive training and an associate degree, and patients will be at harm. Do not cheapen our profession, especially when it is not needed.

I was present at the Groundbreaking Ceremony for the Carol Diane Eustis Center for Health Professions on the Community College of Baltimore County's Essex campus. You were one of the dignitaries present, breaking ground for our state-of-the-art building for our state-of-the-art allied health programs. Please do not let one of those programs suffer because of short-sighted business interests. I am working on many solutions for corporate partners to get through this dip of a never-ending cycle of supply of radiographers in the community. We have always gotten through the lower part of this cycle just fine and will swing back to full capacity soon – without the need of this can of worms proposed in SB0830.

Thank you for considering my perspective on this matter. I respectfully urge you to withdraw SB0830 and to prioritize the well-being and interests of Maryland residents.

Sincerely,

Erin Phelan

Erin Phelan, MA, RT(R), CNMT

RADT 101 Statistics.pdf

Uploaded by: Erin Phelan

Position: UNF

Community College of Baltimore County

Radiography Program

RADT 101* Statistics

Semester	Total # of Students	Passed	Comments
Fall 2021	73	62	
Spring 2022	79	63	
Fall 2022	50	41	
Spring 2023	53	39	
Fall 2023	68	56	
Spring 2024	64		Currently enrolled
Total	387	261	

*RADT 101: Introduction to Radiologic Technology

XRAY Admit Stats 2018.2023.pdf

Uploaded by: Erin Phelan

Position: UNF

Community College of Baltimore County
 School of Health Professions
 Radiography Admissions
 2018-2023

Year	# of Applications	Accepted	Eligible, no seat
2018	47	25	14
2019	36	24	5
2020(*)	50	18	17
2021(+)	44	23	27
2022	85	30	36
2023	60	41	0

*COVID, fewer students accepted in response to reduced clinical sites. 17 Eligible applicants deferred to 2021.

+17 deferred applicants excepted in addition to 5 of the most competitive of application cycle. 27 eligible students no seats available due to clinical placement backup caused by COVID

Sb0830.pdf

Uploaded by: Gabrielle Smith

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. My biggest concern as a licensed Radiographer of 8 years is that there isn't a possibility that a mere 50 hours of training will prepare you to become an x-ray technologist. It took my coworkers and I 2 years of hard, intense training. Not only will this put patients at severe risk of increased doses of radiation due to incompetent technologists, this will also affect our work flow in the hospitals. We will essentially have to work beside untrained technologists, it will cause increased stress, and a decline in staffing in Radiology departments.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Gabrielle Smith RT(R)(MR)

SB0830 Klausmeier Letter (1).pdf

Uploaded by: Grace Kummer

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

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Sincerely,

Grace Kummer
radiography student

SENATORS.pdf

Uploaded by: Heather Damon-Pannone

Position: UNF

Heather Damon-Pannone RT(R)
41 Blue Spire Circle
Baltimore MD 21220
hdamon@umm.edu
410-591-6519
2/20/2024

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

Senate Office Buildings
Annapolis, Maryland 21401

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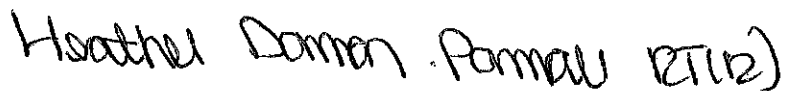
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Sincerely,



Heather Damon-Pannone RT(R)

Klausmeier Letter.pdf

Uploaded by: Jackson Clark

Position: UNF

Jackson Clark
6 Troon ct, Nottingham MD
Radiography Student

2/26/2024

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine
Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

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SB0830,.pdf

Uploaded by: Jacob Lewis

Position: UNF

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Sincerely,

Jacob Lewis

Senators Letter.pdf

Uploaded by: Janelle Love

Position: UNF

Janelle Love
603 Yorkminster Ct
Westminster, MD, 21158
Radiologic Technologist Student
2/26/24

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Kimberly Bowen Rt(R)

Starting IA (1).pdf

Uploaded by: Jenna Sweringen

Position: UNF

Hello, Class of 2025!

Starting in the Spring we will start a class called **Image Analysis** it consists of 3 semesters, RADT 125, RADT 205 & RADT 208.

In this class, you will receive a more in-depth review of the Image Analysis side & Positioning intertwined. You will learn how to produce quality radiographs, how to identify proper and improper positioning with corrections. You will be expected to perform a PowerPoint presentation on the topic assigned to you each semester with a report. You get to teach me and your fellow classmates! Sounds exciting right? I am excited! You will have a quiz after each Image Analysis class. We will go into details on the first day of class about everything for Image Analysis and then you will have a chance to ask questions, if needed pertaining to Image Analysis. I will warn you, It's thorough.

Your first Image Analysis class will be on Thursday, February 15, 2023, in person, in Room ECHP.012. Image Analysis will start in February and will run approximately every other week on Thursday afternoons from 1:00-3:00pm on clinical days for RADT 125. You will leave clinical @12:00PM to allow time to get access to the face-to-face and/or online class if requested per instructor. If you are on the evening shift (3-11pm), you will arrive late to clinical without an attendance point deduction. The schedule is listed under Image Analysis Class in Bright Space and can be found in E-Value also.

The Room locations are subject to change with other semesters and the day of the week will change once you become a second year to Wednesdays, 1-3pm.

You will find all information posted for you in Bright Space for RADT 125, 205, 208 under the Image Analysis section once you have access to these semesters.

Make sure you have your copy &/or online access to the required textbook for this class.

- Martinsen, K. Radiographic image analysis, (5th ed.). St. Louis, MO: Mosby Elsevier.

I look forward to Image Analysis Class with you!!

Brandy Jones RT(R)

Copy of SB0830 Klausmeier Letter.pdf

Uploaded by: Jennifer Briggs

Position: UNF

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. Limited training and qualifications: Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.

2. Addressing shortages through alternative means: Maryland already has robust educational programs for radiologic technologists. Efforts to increase the number of radiologic technologists by increasing admission numbers to existing programs is alleviating workforce shortages



Copy of SB0830 Klausmeier Lett.



without compromising patient safety. The introduction of Limited Licensed Radiologic Technologists does not alleviate the job shortage, but in fact, causes greater shortages in hospital radiographer positions, particularly in the advanced imaging departments of cat scan, MRI, mammography, and interventional and cardiology catheterization labs, which are in dire need of staff.

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Sincerely,

Alia Johnson

SB0830 Klausmeier Letter.pdf

Uploaded by: Jennifer Roelecke

Position: UNF

338 Regina Court
Millersville, MD 21108
jmroeleck@gmail.com
410-925-2311
February 23, 2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

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Sincerely,

Jennifer Roelecke (RT)(R)(ARRT)

Opposition to SB0830 .pdf

Uploaded by: Jessica Morris

Position: UNF

Jessica Morris
8625 Manorfield Rd
Nottingham, MD 21236
Mo1031259@email.ccbcmd.edu
443-902-2521
February 26, 2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

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1. **Limited training and qualifications:** Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
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3. **Patient safety concerns:** The limited scope of practice outlined in SB0830 may expose patients to unnecessary risks by allowing individuals with inadequate

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Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Jessica Morris

Written Testimony SB0830.pdf

Uploaded by: Jessica Shirkey

Position: UNF

Written Testimony Submitted by:
Jessica Shirkey
100 Woodmans Court
Essex, MD 21221
jshirkey@cpcbcmd.edu
443-840-2017

Re: Opposition to **SB0830** - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Position: **Oppose**

Honorable Senators,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned radiologic technologist, educator, citizen, and resident of Maryland, I believe that this proposed legislation presents significant risks

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. **Limited training and qualifications:** Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients.
2. **Addressing shortages through alternative means:** Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. Efforts such as expanding clinical rotation experiences and increasing admission numbers to radiography programs demonstrate proactive steps towards alleviating workforce shortages without compromising patient safety.
3. **Increase shortages across advanced modalities:** Limited scope radiographers are not eligible to perform advanced imaging procedures, creating greater shortages in the advanced imaging departments of Computed Tomography, Magnetic Resonance Imaging, Mammography, Interventional Procedures, and Cardiac Catheterization. All of which are also suffering from staff shortages.
4. **Patient safety concerns:** The limited scope of practice outlined in SB0830 may expose patients to unnecessary risks by allowing individuals with inadequate training to perform radiographic procedures. Ensuring the highest standards of patient care and safety should be paramount in any legislative endeavor related to healthcare professions. The proposed bill states, "Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body." All x-ray machines are the same and can deliver harmful amounts of

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Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Jessica Shirkey BSMI ARRT RT(R)(MR)

JKP - SB0830 Senators Letter.pdf

Uploaded by: Jigna Patel

Position: UNF

Jigna K Patel
7765 Monaghan Rd.
Glen Burnie, MD 21060
(410) 917 - 5150
02/26/24

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

Senate Office Buildings
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senators on the Finance Committee,

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Sincerely,

Jigna K. Patel R.T.(R)(VI)(ARRT)

Opposition Testimony to SB0830.pdf

Uploaded by: Kimberly Bowen

Position: UNF

Kimberly Bowen
812 Mockingbird Lane Apt 302
Towson MD
21286
Radiologic Technologist
2/26/2024

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

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Sincerely,

Kimberly Bowen RT(R)

SB0830 Klausmeier Letter.pdf

Uploaded by: Lilian Njoki

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

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Sincerely,

Lilian Njoki

RadNet response SB830 limited licensed RTs_26Feb24

Uploaded by: Michael Mabry

Position: UNF



Leading Radiology Forward
10461 Mill Run Circle, Suite 1020
Owings Mills, MD 21117

TO: The Honorable Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Members, Senate Finance Committee

FROM: Steve Forthuber, President Eastern Operations

DATE: February 26, 2024

RE: **OPPOSE:** Senate Bill (SB) 830 -- *Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist*

RadNet leads the nation in outpatient diagnostic imaging services with nearly 400 centers in seven states. RadNet has a major presence in Maryland and our Eastern Operations are headquartered in Baltimore. You may know us locally as Advanced Radiology, Community Radiology Associates, and American Radiology Associates with over 60 imaging centers throughout the state. RadNet employs nearly 1,000 Radiologic Technologists (RT) in total across all of our Maryland imaging centers.

SB 830 would create a limited licensed radiologic technologist (LLRT) who would be permitted to perform x-ray examinations of select anatomic area(s) after completing: (1) a total of 50 hours of education and clinical training and (2) successfully passing an examination. If passed, SB 830 would go into effect on October 1, 2024.

RTs are highly trained and skilled professionals who play a critical and an integral role in the patient radiologic care team. In contrast to SB 830, RTs have had to successfully complete an 18 to 25-month accredited Radiology program full-time consisting of: (1) 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas and (2) nearly 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. RTs then must: (1) pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT), (2) obtain a license from the Maryland Board of Quality Assurance in Radiology, and (3) complete at least 24 hours of continuing medical education (CME) every 24 months. The RT designation is the start of a successful and meaningful career in radiology.

RadNet, like many other medical imaging providers, is affected negatively by the current serious shortage of RTs in Maryland and across the nation. Yet, we must put good medicine ahead of any short-term financial considerations and addressing this shortage must be in the best interest of Maryland patients. RadNet is concerned that medical quality and patient safety could suffer and that healthcare costs could be driven-up under SB 830.

While we are not supportive of SB 830 in its current form, RadNet appreciates that the bill is trying to solve the current radiologic personnel shortage in Maryland. RadNet stands ready to work with members of the General Assembly, its leadership, and other stakeholders towards a better and more comprehensive solution that puts Maryland patients first. To us, such a solution consists of: (1) creating a limit radiologic technologist license with more rigorous education and clinical training requirements, competency testing, appropriate clinical supervision, and continuous improvement **and** (2) increasing the supply of RTs by making the RT career path more attractive to candidates by expanding access to training and making it more affordable through tuition assistance and employer incentives and by creating a limited "student licensure" which would permit RT students who have completed their first-year to work in a healthcare facility under the direction of a RT, radiologist, or other clinician with radiologic training.

RadNet appreciates the opportunity to provide this statement before Senate Finance Committee.

SB 830 Letters_part1.pdf

Uploaded by: Michael Mabry

Position: UNF

Barbara Manzie
8302 Condy Court
Clinton, MD 20735

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 7 1/2 years. But I have been a Radiologic Technologist (RT) for the past 32 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Barbara Manzie

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kelsey Rollins
5000 Skylark Drive
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Services for the past 8 months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kelsey Rollins

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gonzalo Montecinos
12920 Valleywood drive
Silver Spring, MD 20906

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates] for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gonzalo Montecinos

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gabrielle Smith
1721 Glen Curtis Road
Baltimore MD, 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at St. Joseph Advanced Radiology for the past five years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist. It would be impossible to learn all that is required to safely operate ionizing radiologic equipment, especially in the "one week" length of training you are permitting in SB 830.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gabrielle Smith

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Siyao Zhang
4 Cross Tie Ct
Gaithersburg MD 20879

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Shady Grove Hospital and Community Radiology Associate for the past 5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Siyao Zhang

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gabrielle Smith
1721 Glen Curtis Road
Baltimore MD, 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gabrielle Smith

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Vicki Schaefer
2708 Manhattan Ave
Baltimore, MD 21215

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [45] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Vicki Schaefer RT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Heidi Hess RT-R
918 Starbit Rd
Towson MD 21286

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [18] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Heidi Hess RT-R

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tammy D. Althoff
8202 Hudson Court
York, Pa 17403

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at various medical facilities including Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tammy D. Althoff R.T (retired) RDMS

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Melanie Townes
15380 Christy Lane
Waldorf, Maryland 20601

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Services – Patuxent for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Melanie Townes, RT (R)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Laura Garner RT(R)(M)(CT)
12301 Jamaica Avenue J234
Ocean City, MD 20639

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Services for the past 26 years and 30 years in the profession. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Laura Garner RT(R)(M)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amy McBain
380 Home Place
Lusby MD, 20657

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 18 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Amy McBain R.T. (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mitchell Johnson
3915 Sea Bass CT.
North Beach, Maryland
20714

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Patuxant Imaging] for the past [11] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mitchell Johnson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Laura Eskins
6280 Nicole Drive
St. Leonard, Md 20685

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Laura Eskins

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer Gantt
16300 Mount Calvert RD
Upper Marlboro MD 20772

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology] for the past [21] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jennifer Gantt

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Arlene Brown
PO Box 1284
Waldorf, MD
20604

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Bowie Radiology for the past [22] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Arlene Brown

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Miranda Elliott
1934 Main ave Pasadena
MD, 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RadNet, Dimensions health, Capital orthopedics, ChoiceOne urgent care, WiseCare urgent care, PriorityCare urgent care] for the past [15] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Miranda Elliott

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Erika Jones
1534 N Forest Park Ave.
Gwynn Oak, MD 21207

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advance Radiology Timonium] for the past [8] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Erika Jones

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Rebecca Hohman
314 Red Pump Road
Bel Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology in Timonium Crossing for almost 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Rebecca Hohman

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer Friesner, RT(R)(M)
1612 Pinnter Road
Lutherville, MD 21093

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [30] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jennifer Friesner

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Elizabeth Varnedoe
1870 Cedar Road
Pasadena, MD 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past [40+] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Elizabeth Varnedoe
BSRT (R), MR, CT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Taren Bokman
820 Grazing Field Way
Deale Md, 20751

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Heritage Imaging Center for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Taren Bokman RT(R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Eliza Mullikin
7316 Waldman Ave.
Sparrows point Maryland
21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Eliza Mullikin

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sharon Curtis
4828 Melbourne Road
Baltimore, Md. 21229

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 18 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sharon Curtis (MR) (RT) (ARRT)

Sharon Curtis RT (R) (MR) (ARRT)
MRI Technologist
Advanced Radiology/Howard County
8820 Columbia 100 Parkway
Columbia, MD 21045
443-917-5536 (T)
443-436-4181 (F)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tracy Boyd
3120 Lacrosse Ct.
Dunkirk, MD 20754

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology for the past 26 years. To become a RT, I had to successfully complete a 25 month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures, increased radiation exposure and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Tracy Davis Boyd

February 23, 2024

The Honorable Senator Pamela Beidle, Chair The Honorable Katherine Klausmeier, Vice Chair Senate Finance Committee Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacy Dittmar
308 Miles Rd Essex, MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacy Dittmar RT(R)(M)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Denise Jackson
4666 Scottsdale Place
Waldorf, MD 20602

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology (RadNet) for the past 2 ½ years and a technologist for 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,600 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Denise A. Jackson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jamilet Amaya Haye
335 Upperlanding Rd Essex
MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology Medical Arts for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jamilet Amaya Haye

Jamilet Amaya Haye

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer Jolley
8835 Falling Leaf Drive
Owings, Md 20736

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 6 years and a Radiologic Techlogist for 23 years in total. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jennifer Jolley RT (R) (M) (CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

H. Gayle Coley
6950 Exeter Court # 202
Frederick, MD 21703

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology for the past 30 years. To become a RT, I had to successfully complete an 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Harriett Gayle Coley

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Laura Randolph
8075 Amberleigh pl
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Laura M Randolph RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jacklyn Tomasko
1033 Basswood Dr.
Prince Frederick, MD 20678

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jacklyn Tomasko RT(R)(M)(BD)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alec Best
10958 Shadow Lane
Columbia, MD 21044

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alec Best

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brittany Lawson
6320 Early Glow Ct
Columbia, MD 21045

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) 17.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brittany Lawson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Milinda Valverde
61 Haverhill Rd
Joppatowne, MD 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at many different facilities for the past 24 years, most recently at Medstar Radiology. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Milinda Valverde

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Erin Hite RT(R)(M)(MR)
9487 Cameldriver ct.
Columbia, MD 21045

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [4] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Erin Hite RT(R)(M)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kimberly Loude, RT
400 Greenland Beach Rd
Greenland Beach, MD 21226

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 18 years and working in my field for 41 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kimberly Loudon, RT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Denise Haller
385 Hopkins Landing Drive
Essex, MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [27] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Denise Haller

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

D'Andrega Jernigan
7900 Lowtide Ct
Pasadena Md 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 13 years. The first 8 years working at Chesapeake Orthopedics and then 5 at Advanced Radiology. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

D'Andrega S. Jernigan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cristina Stoots
4230 Federal Hill Road
Street, MD 21154

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology in Lutherville for the past 24 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cristina Stoots RT (R)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Chelsea Mehren
802 Calvin place
Bel Air MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Chelsea Mehren

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lorette L. Kenney R.T.(R)
5402 Huckleberry Lane
Sykesville, MD 21784

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at the Fisher and Eldersburg locations for the past 4 years and a Radiologic Technologist for 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months. In addition I work for Johns Hopkins Howard County Medical Center. My training has afforded me the privileged to work along side some incredible surgeons and doctors. With out the ongoing training required and received I would not be able to provide the highest quality of care that I do provide.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Lorette L. Kenney R.T.(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Casey Wilson
1010 Grandview Ave
Sykesville Md 21784

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology, Eldersburg] for the past [6] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Casey Wilson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stephanie A Hoare
600 Gahle Ct.
Westminster, MD.
21157

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Eldersburg for the past three years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stephanie A Hoare

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Deborah A Tucker
1607 Davinda Drive
Finksburg, MD 21048

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Deborah A Tucker

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sarah Myers
11920 Bluestone Road
Kingsville, MD 21087

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sarah Myers

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Gschwind RTR (CT)
1906 Hibblings place
Havre De Grace MD 21078

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Gschwind

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Melinda Wiecech
1326 Gates Head Drive
Bel Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 27 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Melinda Wiecech

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sonia R. Wilhelm, RTRM
611 Tritapoe Dr
Knoxville, MD 21758

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet Mt Airy for the past 8 months, but have been a Radiologic Technologist for 43 years. To become an RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sonia R. Wilhelm, RTRM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tehilla Rose, RT (R)(M)
607 Old Crossing Drive
Pikesville, MD 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I am the Mammography Imaging Specialist for American Radiology Services and Advanced Radiology. As well, I have worked as a mammographer at prestigious institutions; Johns Hopkins, MCV, Paredes Institute for Women's Imaging. I pride myself not only on my extensive knowledge in my field and contribute the success to my intensive training. To become a RT, completed a rigorous baccalaureate degree at VCU. My educational requirements consisted of well over 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist. In my opinion this is a massive disservice to the field, our patients and the proposed 'graduates'.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tehilla Rose, RT (R)(M)

Mammography Imaging Specialist

American Radiology Services and Advanced Radiology

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Martina Tesfayeova R.T.(R) (ARRT)
9 Brampton Court
Reisterstown
Maryland 21136

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 1.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Martina Tesfayeova B.S., R.T.(R) (ARRT), CET

February 23, 2024

The Honorable Senator Pamela Beidle, Chair

Rachel Marders

The Honorable Katherine Klausmeier, Vice Chair

3806 Hickory Ave

Senate Finance Committee

Apt 301

Miller Senate Office Building, 3 East Wing

Baltimore, MD 2121

11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) with Advanced Radiology since 2018 and have been a licensed Radiologic Technologist since 2005. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat

procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Rachel Marders (RT) R



Rachel Marders | RTR | GBMC Imaging Center | Office 443-279-9618 | rachel.marders@radnet.com

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Leah Davis
1521 Sunswept Drive
Bel Air, Maryland 21015

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

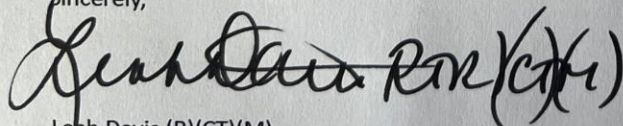
I have been a Radiologic Technologist (RT) at Advanced Radiology Harford Imaging Center for the past 31 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Leah Davis RTR(CT)(M)", written in a cursive style.

Leah Davis (R)(CT)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Rachel Velasco RTRM
489 Eleanor Lane
Arnold, MD 21012

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 19 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Rachel Velasco

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Ms. Cheryl Logue
(RT)(R)(CV) (CT)(M)(MRI)
1030 Spa Rd, Apt B
Annapolis, MD 21403

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 16 years but I have a technologist for 32 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

A handwritten signature in blue ink, appearing to be 'Cheryl Logue', with a long horizontal flourish extending to the right.

Cheryl Logue RT (R) (CV) (CT) (M) (MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alicia Philipp
10241 Red Lion Tavern Court
Ellicott City, MD 21042

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alicia Philipp

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Bonnie Eisel
914 S. Wieker Rd
Severn, MD 21144

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Arundel Mills] for the past 12 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Bonnie Eisel

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Abercrombie
116 Albany Av East
Walkersville, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Frederick Health Hospital for the past [28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Abercrombie

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Chris Tolliver
1618 Sudbrook Lane
Pikesville, MD 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Chris Tolliver

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristen Temple
4604 Clermont Mill Road
Pylesville, MD 21132

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristen Temple

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sandy Ehudin
81 Chase mill circle
OwingsMills, Md 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [34] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sandy Ehudin RT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amanda Hornberger
10682 Old Bond Mill Rd,
Laurel, MD 20723

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Amanda Hornberger

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacey Fannon
2345 Columbine Court
Gambrills, MD 21054

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 12 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacey Fannon R.T.(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alexandra Bednarik
29746 Traceys Way Easton,
MD 21601

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology Annapolis for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alexandra Bednarik

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Marli Lockitsky
5964 Leben Dr.
Frederick, MD 21703

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology for the past 27 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Marli Lockitsky RT (R)(M)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name Donna Truiett
Your Address 907 N. Payson St.
Baltimore MD 21217

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [fill-in center] for the past [fill-in] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Your Name

Donna Truiett

I practice at Advanced Radiology

I have been a Radiologic technologist for 34 years

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristi Stephenson
8736 Clemente Ct
Jessup, MD 20794

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past eight months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristi Stephenson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Olivia Lea-Wilson
6721 Black Duck Ct.
Frederick, MD 21703

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at various locations for the past 5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Olivia Lea-Wilson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Wendy Sheffer
45 Woodland Drive
Jacobus, PA 17407

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Wendy Sheffer

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kimberly Bateman
8455 Wedding Dr
Welcome, MD 20693

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 29 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kimberly Bateman
RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kimberly Hupfeld-
Underwood
4008 Manor Oaks Road
Phoenix, MD 21131

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) at GBMC / Medical Imaging of Baltimore and Advanced Radiology for the past [39] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kimberly Hupfeld-Underwood

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

NANCY A. SCIPIONI
904 YVETTE DRIVE
FOREST HILL, MD 21050

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [47] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Sincerely,

NANCY A. SCIPIONI RT R M

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gina Riefner
7848 Vernon Ave.
Nottingham. MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [44] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gina Riefner RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Philip Flaker
8528 Light Moon Way
Laurel, MD 20723

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Philip Falker

February 23, 2024

The Honorable Senator Pamela Beidle, Chair The Honorable Katherine Klausmeier, Vice Chair Senate Finance Committee Miller Senate Office Building, 3 East Wing 11 Bladen St., Annapolis, MD 21401-1991	Joan M Freitag 375 Tri Hill RD York, PA 17403
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Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Joan M Freitag

February 23, 2024

The Honorable Senator Pamela Beidle, Chair The Honorable Katherine Klausmeier, Vice Chair Senate Finance Committee Miller Senate Office Building, 3 East Wing 11 Bladen St., Annapolis, MD 21401-1991	laurie saperstein 22 Harrod ct Reisterstown, Md 21136
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Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [35] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

laurie saperstein,RT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Angela Piccolomini,
RT(R)(MR)
76 Dendron Court,
Parkville, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Angela Piccolomini

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stephanie Evans
1327 Meadowvale Rd
Glen Burnie Md 21060

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology- Aiello Center] for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stephanie Evans RT. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sabrina Knott
301 Dorchester
Avenue #60 La Plata MD,
20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates of Clinton for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sabrina

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name Kamar Jordan
Your Address
304 Watertons Way Joppa
MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [N/A] for the past [N/A] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Your Name Kamar Jordan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Donna Wright
511 Amberly Road
Glen Burnie, Maryland 21060

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Crain Towers site for the past 22 years. I have been a registered RT since 1999. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Donna Wright

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Ashley Hailey
11417 Hermitt St
Clinton, MD 20735

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology- Clinton for the past three months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Ashley Hailey

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

MARIA WAITT
5722 CARRINGTON DRIVE
WHITE MARSH, MARYLAND
21162

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [ADVANCED RADIOLOGY] for the past [25] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

MARIA WAITT RTRM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Heather Roberts
154 Mattix Run
Galloway, NJ 08205

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Heather Roberts R.T.(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Carmela Schindel
1369 Long Corner Rd
Mt Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology, Rockville for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Carmela Schindel

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tatyana Skorupska
10320 Stratomore Hall
Street, Unit 405
Bethesda
20852

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at CRA , Rockville Imaging Center for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tatyana Skorupska

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Catherine Cornish
1336 Hallock Drive
Odenton, MD 21113

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 27 years in various facilities. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Catherine D. Cornish, MS, BSRS, AAS, RT (R) (M)

February 21, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Renee Marcellino
2505 Hemingway Dr #2B
Frederick, MD 21702

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Frederick Health Hospital for the past 24 years and at Shady Grove Adventist Hospital 13 years prior to that. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Renee L Marcellino RT, R, M

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tanya Carmen
11703 Mohr Rd.
Kingsville, MD 21087

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Rad Net for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tanya Carmen RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Bonnie Heaton
4118 Loch Carrow RD
Nottingham MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Pomona for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Bonnie Heaton R.T. (R)(M)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Margaret E Jordan
604 Twin Brook lane
Joppa, Maryland 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a registered Radiologic Technologist (RT) at Advanced Radiology for the past 36 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Margaret E Jordan RTR R M BD

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Bryan Newman
8203 pleasant Valley Road
Stewartstown, Pa 17363

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Timonium Crossing for the past 22 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Bryan Newman

A handwritten signature in black ink, appearing to read 'Bryan Newman', is written below the typed name.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jordan Sloan
1705 Harbor Drive. Chester
MD 21619

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [] for the past [11] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jordan Sloan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sandra Webb
6340 Kyle Drive
Sykesville, Md. 21784

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [16] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sandra Webb

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amanda Brandl
2134 Kyle Green Road
Abingdon, MD 21009

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 8 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Amanda Brandl

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Johnson
7632 Anamosa Way
Derwood, MD 20855

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist RT/ Ultrasound Technologist RDMS at CRA Bethesda for the past 44 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Johnson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Andrew Hieronymus
3072 Moon CT unit B
Ft. Meade, MD 20755

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RadNet] for the past [2] years with 14 years experience at other clinics. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Andrew Hieronymus

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Barry Luersen
3715 Sprigg Street North
Frederick, MD 21704

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advance Radiology, Crossroads] for the past [nine] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Barry Luersen

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amanda Purkins
407 Chestnut Trl Crownsville
MD 21032

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Amanda Purkins

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Michelle White
10 14 Westward Drive Mount
Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology Crossroads office for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Michelle White

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kira Markus
1327A Donald Avenue
Severn, MD 21144

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 12 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kira Markus

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Henderson
3 Softwinds CT
Owings Mills, MD 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 9 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Henderson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debbie Moss
5107 Weavers Ct. Brooklyn
Park, MD 21225

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Johns Hopkins Hospital and Advanced Radiology for the past 24 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Debbie Moss

SB 830 Letters_part2.pdf

Uploaded by: Michael Mabry

Position: UNF

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Janice Dupont
7978 Alchemy Way
Elkridge, MD 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [20] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Janice Dupont

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Julia Vonella
438 Madingley Rd, Linthicum
Heights, MD 210990

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Crossroads imaging center] for the past [2] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Julia

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mona Fuller
5508 Prince William CT,
Frederick MD, 21703

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [17] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mona Fuller R.T. RM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

David Bellistri
3401 Cayman Way
Abingcon, Md. 21009

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Whitesquare Imaging Center for the past 35 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

David Bellistri RT(R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Hadir Samimi
21302 Emerald Drive
Germantown, MD 20876

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past ten years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Hadir Samimi

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Andrea Austin
11409 Duryea Drive
Potomac, MD 20854

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Andrea Austin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Deborah Kearney
3 Sandstone Court
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [42] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Deborah Kearney RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra Burroughs RTR R CT R
6915 Rose lane
Laplata Md 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology] for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Debra G Burroughs RTR CTR

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

RENEE ROSS
114 CHELL RD
JOPPA MD 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at ADVANCED RADIOLOGY for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

RENEE ROSS

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Michelle L Brumley
2 Lothian Way
Lothian, Md 20711

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 32 years, employed with Community Radiology for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Michelle L Brumley

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristen Hauptmann
2515 Tally Ho Drive
Fallston, MD 21047

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [25] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristen Hauptmann RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jayser Gamboa, RT(R)
7545 Coach Place,
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Clinton Community Radiology Associates for the past 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Jayser Gamboa, RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alisa Stephens
7923 Underhill Road
Baltimore, MD 21237

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alisa Stephens R.T.(R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Prudence A. Cromartie
7407 Perrywood Rd
Upper Marlboro, MD 20772

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

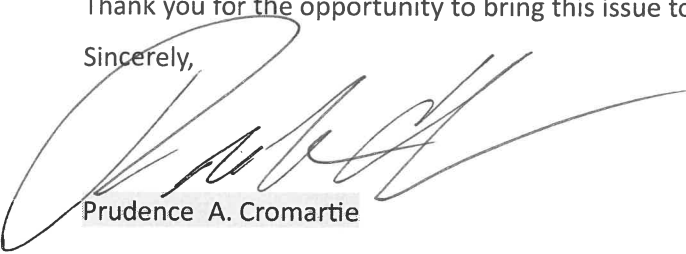
I have been a Radiologic Technologist (RT) at Community Radiology for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Prudence A. Cromartie

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer Bayne
117 Simmons Ridge Rd.
Prince Frederick, MD 20678

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology at Calvert for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jennifer Bayne

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Carolyn Riffe
1712 Market Street
Owings, MD 20736

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology at Calvert for the past 19 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Carolyn Riffe

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra L Miller Joiner
8148 Grayden Lane
Brandywine Md.20613

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Clinton Imaging] for the past [40] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Debra L Miller Joiner

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brenda Newman
8203 pleasant Valley Road
Stewartstown, Pa 17363

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Timonium Crossing for the past 22 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brenda Newman

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Skene
Pasadena, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [15] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Skene

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Linda Ortmann R.T. (R,M,CT)
11602 Sun Circle Way
Columbia, MD 21044

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 40 years, I have worked at Advanced Radiology for the past four years. To become a radiologic technologist, I had to successfully complete a two year accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of experienced Radiology Technologists. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Linda Ortmann, R.T. (R)(M)(CT)

February 21, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer L. Mister RT (R)(M)
104 Parkway Avenue
Havre de Grace, MD 21078

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Jennifer L. Mister". The signature is fluid and cursive, with a large initial "J" and "M".

Jennifer L. Mister RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Boeshore
8649 Heathermill rd
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [37] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Boeshore RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tyler Joseph Dillon
210 Timber Trail APT C, Bel
Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past year and for 5 years at Charleston Area Medical Center Memorial Hospital in West Virginia. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tyler J. Dillon

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristina Kelm
521 Sunset Knoll Rd,
Pasadena MD 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Kristina Kelm] for the past [14] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristina Kelm R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Leah M. Engle
116 Mountain Rd. Unit 3C
Glen Burnie, MD 21060

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Leah M. Engle RT

PS.

If you think this is a good idea (having 2 weeks training to do this job) I would love to invite you to shadow a clinical session with a student that is 2 weeks into this program. It will clearly demonstrate how absolutely insane this suggestion is.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jody A. Donohue
7527 Chesapeake Avenue
Baltimore, MD 21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jody A. Donohue

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jacob Durst
4313 Falls Rd
Baltimore, MD 21211

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology located at GBMC for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jacob Durst

February 21, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sherella Butler
4722 Duncannon Rd.
Pikesville, MD. 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 years as well as Laurel Medical Center for 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sherella Butler

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Aleksandr Kovalerchik
2308 Cavesdale Rd.
Owings Mills, MD 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Aleksandr Kovalerchik

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Snell
8354 Montgomery Run Rd. #
G
Ellicott City, MD 21043

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Snell

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Joseph Gerbes
813 Myrth Ave
Baltimore MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Joseph Gerbes

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name: Diane Durm
Your Address: 2503 Houcks
Mill Rd. Monkton, MD
21111

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist RT (R)(CV)(M)) at Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Diane Durm

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stefanie M. Esbrandt
2514 Burr ridge Rd
Baltimore, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past six years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stefanie M. Esbrandt

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dawn Schafer
614 Kilmarnock Trail
Bel Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Dawn L. Schafer

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tina Flynn
3401 Keats Terrace
Ijamsville, MD 21754

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at hospitals and outpatient centers in New York and Maryland for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tina L. Flynn

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sarah Cote
10506 Old Court Rd
Woodstock, MD 21163

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at the Owings Mills Advanced Radiology Center for the past 8 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sarah Cote

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Katherine Lynch
3835 Ocean Sunfish Ct
Waldorf, MD 20603

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 8 months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Katherine Lynch

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gwen Sexton
3810 Conowingo Rd
Darlington MD, 21034

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gwen Sexton RT(R) CT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brian Bell R.T. (R)
7680 Cedar Dr.
Pasadena, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology-Aiello Center for the past 5.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brian Bell R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Renee Rehmar
1071 Montessori Dr
Westminster Md 21158

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Pomona for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Renee Rehmar R.T. (R)(MR)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lisa Fritz RT R MR
4028 Geeting Rd.
Westminster, MD 21158

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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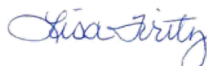
I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 33 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Lisa Fritz RT R MR

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Michaela Thess
8203 Berryfield Drive

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past nine years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Sincerely,

Michaela Thess

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nicole Fuoco
15955 Frederick Rd #2548
Rockville, Md 20855

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates, Rockville Pike for the past 1.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nicole Fuoco RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Adamari Sanchez
11215 Georgia Ave Apt 837,
Silver Spring , MD, 20902

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radology Assocaites for the past 2-3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Adamari Sanchez

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

BARBARA HILBERT
1424 FAIRBANKS DRIVE
HANOVER MD 21076

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advance Radiology Glen burnie for the past 27 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Barbara Hilbert RT R, CT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name Karen Smith
Your Address 20822 Emerald
Drive Hagerstown, MD 21742

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates] for the past [14] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Smith

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra A.Y. Outten
213 N. Stokes Street
Havre de Grace, MD 21078

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 30 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Debra. A.Y. Outten, R.T.R.M.Q.M.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kalah Houston
31 Highlands Ct
Owings Mills, MD 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Owings Mills Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kalah Houston

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Constance Mascelli
1002 Longstream Court
Bel Air MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I am Radiologic Technologist (RT) at Advanced Radiology (Harford 104) and have been a Registered Technologist for 33 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting

more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Constance Mascelli RT(R)(CT)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brittany Brockmeyer
16 Juxon Ct
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Rad Net for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brittany Brockmeyer RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Noel Tomlinson
10107 Tipperary Rd.
Parkville, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Noel Tomlinson, RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Terri Kerth
4445 Hope Acres Drive
White Plains, MD 20695

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Pembroke for the past 24 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Terri Kerth RT(R)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Damien R. Dickerson, B.S., R.T (R)
4317 Hampshire Rd
Hampstead, MD 21074

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Owings Mills Radnet Imaging center for the past 1.5 years and in the Medical Imaging field for 18 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mr. Damien Robert Dickerson, B.S., R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kathleen Franklin
R.T.(R)(MR)(CT)A.R.R.T.
7500 Cameron Ridge Road,
Hughesville, MD 20637

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology @ Pembroke for the past 40 plus years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kathleen Franklin R.T.(R)(MR)(CT) A.R.R.T.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance
Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jackie Edwards
2523 Karen Way Westminster,
MD. 21157

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for over 30 years and currently work at Advanced Radiology. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 it would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist. Each patient will be at risk of excessive radiation due to repeats.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures which is more radiation to the patient and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jackie Edwards

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jihye Kim
7423 Slipknot Aly, Elkridge,
MD 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jihye Kim

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Laura Robinson
8203 Buchanan Dr.
Walkersville, MD 21793

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology] for the past [2] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Laura Robinson RTRM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacey Haga
6620 Gilardi Road
Boonsboro, MD 21713

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates, Crestwood office, for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacey Haga RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991 Nicole Heffner
PO Box 13 Maugansville MD 21767

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates Crestwood for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months. In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,
Nicole Heffner RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nadia Routson
811 Stallion Drive

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nadia Routson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Eliza Mullikin
7316 Waldman Ave.
Sparrows point Maryland
21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Eliza Mullikin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cara Moore-Broadus
25 Tulsa Lane
Hagerstown, MD 21740
240-382-4428

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates] for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cara Moore-Broadus

Handwritten signature of Cara Moore-Broadus in black ink, appearing to read "BS, RT (K) (u)".

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Samantha Ivan
218 Crestview Dr. Thurmont,
MD 21788

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates Rose Hill for the past 2.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Samantha Ivan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Carole A. Bankard
3707 Perry Hall Road
Perry Hall, Maryland 21128

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 47 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Carole A. Bankard

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen L. Kraynak
9530 Childacrest Dr.
Boonsboro, MD 21713

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Frederick Health /Community Radiology(Rosehill)] for the past [31] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen L. Kraynak

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amy Rinebolt
5514 Ferrero Lane
Keedysville, MD 21756

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates- Rose Hill location for the past 13 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Amy Rinebolt

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Soellner RT(R)(MR)
2813 Ross Avenue
Sparrows Point, MD 21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 39 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Soellner RT(R)(MR)

443-585-5195

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alisa Downing
18616 Queen Elizabeth Drive
Brookeville MD 20833

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RADNET Community Radiology Associates for the past five years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alisa Downing

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Christine Hollar
5309 Concord Ct.
Mt. Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Assoc. for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Christine Hollar R.T. (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Donovan
622 S Broadway Apt 107
Baltimore MD 21231

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Donovan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Samantha Tyler
53 Shrewsbury Ct.
Perry Hall MD, 21128

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [4] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Samantha Tyler

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kelly Forshey
5 Sonora Drive
Pasadena, MD 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kelly Forshey RT(R) (M) (CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Pamela Schneider
613 Kahn Drive
Baltimore, Maryland 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Pomona Square] for the past [51] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Pamela Schneider, R.T.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Rebecca Winters
20240 Waters Row Terrace
Germantown, MD 20874

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Rebecca Winters

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Patricia L. Horney, RT(M)(QC)
ARRT, AA
317 Locust Avenue
Essex, MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [27] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Patricia L. Horney, RT

February 23, 2024

Ashley Keedy
224 Weldon Circle
Boonsboro, MD 21713

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Ashley Keedy

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Joyce Rose
7812 Falling Leaves Ct
Ellicott City, MD 21043

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology, Howard County] for the past [32] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Joyce Rose

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen L Giesey
47 Logan Drive
New Freedom, PA 17349

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 35 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen L Giesey R.T.R(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lori Ann Baldoni
1892 Lakeland Dr
Finksburg Md 21048

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) with Advanced Radiology/ RADNET for the past 19 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Lori Ann Baldoni R.T. (R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Christine Barsda
1 Ewing Drive
Reisterstown, MD 21136

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Northwest Hospital and Sinai Hospital for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Christine Barsda

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

krystle Haskins
2300 Weathervane road

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Hunt Valley] for the past [5] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Krystle Haskins R. T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Chantel Jackson
809 Bradley Road
Joppa, MD 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at multiple Advanced Radiology offices for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Chantel Jackson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Melissa Clites
9750 Smith Way Dunkirk, MD
20754

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Patuexent Imaging/ARS] for the past [22] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Melissa Clites

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Antonio M. Papel, RT, MR, ARRT
1339 Atwood Rd
Silver Spring, MD 20906

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Antonio M. Papel

--

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name GIRMA
MENGESHA
Your Address 834
UNIVERSITY BLVD. WEST
SILVER SPRING MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RAD NETS] for the past [4] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Your Name

GIRMA MENGESHA

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Staci Crawford
55 Sparrows Way
Elkton, MD 21921

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past [9] months. I have been a technologist since 1996. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Staci Crawford

Staci Crawford RT(R)(CT)
Advanced Radiology Harford

February 20, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Janine Royer
6188 S Steamboat Way
New Market, MD 21774

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Janine Royer

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jewell C. Liotino
213 Garner Ave
Waldorf, MD 20602

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Pembroke for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jewell C. Liotino

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lisa Findley
4110 Carrick Ct
Emmitsburg, MD 21727

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 5 years as well as several other locations over the past 30 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Lisa Findley RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cherie Casey
Westminster MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced radiology and other facilities for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cherie Casey R.T.R (M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Sponaugle
107 Amanda Ln
Centreville MD 21617

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology- Annapolis for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Sponaugle RT (R)(M)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristin Rodgers
5564 Gayland Road
Baltimore, MD 21227

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 17 years. That doesn't include the 5 years that I worked at another location. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristin Rodgers RT R CT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristin Kearney
4216 Roop Road
Mt. Airy, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology – Fisher for the past 6 years and Johns Hopkins Howard County Hospital Center for 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristin Kearney RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cara Pedrick
6 Monmouth Road
Catonsville, MD 21228

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cara Pedrick

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Meredith Chamberlin
420 Regester Ave
Baltimore MD 21212

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Meredith Chamberlin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kelly A. Kunze, R.T.(R)(CT)
101 Theodora Court
Forest Hill, MD 21050

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology/RadNet for the past 37 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kelly A Kunze R.T.(R)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacy Ingalls
1253 Collier Lane
Belcamp, MD 21017

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacy Ingalls

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nadja Fermin
4013 Windermere Way
Mount Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advance Radiology for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nadja Fermin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jessica Long
10193 Spruce Way
Ellicott City MD 21042

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Crossroads for the past 5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jessica Long

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gina Lester
17940 Lyles Drive
Hagerstown, MD 21740

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at CRA Crestwood for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gina Lester RT (R) ARRT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Deborah Kaiser
7570 Merrymaker Way
Elkridge, Maryland 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I am currently enrolled as a full-time student to become a Radiologic Technologist. To become a RT, I will have to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements will consist of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This will be followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I will then have to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I will need to obtain a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months. I take my education very seriously and believe that this profession calls for this level of education. I am not looking to cut corners to become a Radiologic Technologist any sooner.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Deborah Kaiser

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cheryl L Sullivan
2301 Ellen Ave
Parkville, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at several Maryland healthcare facilities for the past 38 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cheryl L Sullivan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Susan Alexander
61 George St Taneytown, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) at RadNet for the past 38 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Susan E Alexander

February 23, 2024

Margaret Farkas
160 Pinehurst Lane
Easton, Pa 18042

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at RadNet for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Margaret A Farkas

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

April M. Reed
1554 Buckhorn rd
Sykesville, MD 21784

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

April M. Reed



April M. Reed R.T. (CR)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Charmaine Blanchard
10103 Baltimore Avenue Apt
2306
College Park MD 20740

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates Leisure World] for the past [20] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Charmaine Blanchard

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Anderson
6722 Pyramid Way
Columbia, MD 21044

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at RadNet for the past 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Anderson R.T. (R)(M)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Leandra Caughy
5809 Hawk Ridge Rd
Frederick, MD 21704

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Rose Hill for the past 4 months and a technologist for 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Leandra Caughy

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Somosky
4035 Todd Drive
Prince Frederick, MD 20678

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates Bowie-South] for the past [24] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

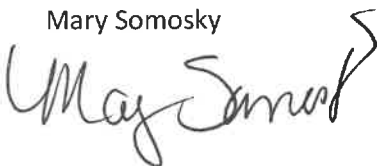
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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Somosky

A handwritten signature in black ink that reads "Mary Somosky". The signature is written in a cursive style with a large, sweeping flourish at the end.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Katelyn Weaver
1000 Prentiss Point Parkway
Martinsburg, WV 25401

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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Sincerely,

Katelyn Weaver

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gregory Swartz
11780 Green Valley Road
Union Bridge, Maryland
21791

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

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I have been a Radiologic Technologist (RT) for 7 years and have been at Community Radiology Associates for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gregory Swartz

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alyssa Bloom
12355 Shelby Ave
Waynesboro, PA 17268

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 10 years and have been at Community Radiology Associates for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alyssa Bloom

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Terri Goodwin, R.T. (R)(M)
6 Valley Park Court
Damascus, MD 20972

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 17 years. In total, I have been a Registered Technologist for 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Terri Goodwin, R.T (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Trevathan
6120 Kerrick DR
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Clinton imaging Center for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

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Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Trevathan

HB0934 Delegates Letter.docx.pdf

Uploaded by: Michaela Kotishion

Position: UNF

Michaela Kotishion
649 Kingston Road
Middle River, MD, 21220
michaelakotishion@gmail.com
443-862-1901
02/26/2024

Delegates Joseline A. Pena-Melnyk, Bonnie Cullison, Tiffany T. Alston, Heather Bagnall, Harry Bhandari, Brian Chisholm, Pam Lanman Guzzone, Terri L. Hill, Steve Johnson, Anne R. Kaiser, Kenneth Kerr, Nicholas R. Kipke, Robbyn Lewis, Lesley J. Lopez, Ashanti Martinez, Matthew Morgan, Teresa E. Reilly, Samuel I. Rosenberg, Kathy Szeliga, Deni Taveras, Jennifer White Holland, Jamila J. Woods,

House Office Buildings
Annapolis, Maryland 21401

Re: Opposition to HB0934 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Delegates on the Health and Government Operations Committee,

First and foremost, I would like to introduce myself. My name is Michaela Kotishion, and I am a Radiologic Technologist that is licensed in Maryland. I stand as a graduate of the Community College of Baltimore County X-ray program. I have been working in the field of Radiology for 3 years. My work history includes Medstar Franklin Square Medical Center, University of Maryland Midtown Campus, and Lifebridge Sinai hospital. I am employed currently at the Center of Advanced Orthopedics. This career path has provided me with a passion that extends further than my job title. This career is not obtainable without a program that was 2 years long, 5 days a week, no winter or semester breaks. I strongly oppose this bill for the safety of our community. The education that radiographers receive is not something that can be taught in one year, the bill calls for a mediocre 50 hours to administer radiation to our community. As a former trauma hospital employee, our images are relied on for life, and death scenarios. Patients deserve fully licensed competent technologists, and it is our bare minimum duty as a technologist to provide that. In other settings that do not fit trauma criteria, patients deserve competent technologists so quality images can be produced to adhere to their diagnosis. Passing this bill will change the quality of healthcare that we provide to our community. As the eyes of medicine we are the front lines of diagnosing a patient. Every single member of our community in Maryland deserves quality healthcare, and that starts with fully licensed Radiographers.

Thank you, Michaela Kotishion

I am writing to strongly oppose HB0934, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this

proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. Limited training and qualifications: Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
2. Addressing shortages through alternative means: Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. Efforts such as expanding clinical rotation experiences and increasing admission numbers to radiography programs demonstrate proactive steps towards alleviating workforce shortages without compromising patient safety. The introduction of Limited Licensed Radiologic Technologists does not alleviate the job shortage, but in fact, causes greater shortages in hospital radiographer positions, particularly in the advanced imaging departments of cat scan, MRI, mammography, and interventional and cardiology catheterization labs, which are in dire need of staff.
3. Patient safety concerns: The limited scope of practice outlined in HB0934 may expose patients to unnecessary risks by allowing individuals with inadequate training to perform radiographic procedures. Ensuring the highest standards of patient care and safety should be paramount in any legislative endeavor related to healthcare professions. The proposed bill states, "Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body." All x-ray machines are the same and can deliver harmful amounts of radiation to patients. With limited training on such machines, the harm to the community is real. 15 clock hours of radiation protection education is not sufficient to protect patients. Most Radiography program students receive over 75 hours of radiation protection education, for example.
4. Potential long-term impacts: We have a robust mechanism for licensure for the field of radiography in this state already. If you open the door for the job category of Limited Licensed Radiologic Technologist, you can never close it. These less-trained workers will be able to perform about 50% of the studies that are currently designated to be performed by a licensed radiographer only. Outpatient and urgent care centers will never hire a full radiographer if they can hire a Limited Licensed Radiologic Technologist. Even hospitals will hire less radiographers forever more. Job opportunities for radiographers will decrease and will never recover after the shortage is over. Radiography programs will never be at full capacity as once was. This will decimate the radiography

profession in Maryland, a profession that takes three years of comprehensive training and an associate degree, and patients will be at harm. Do not cheapen our profession, especially when it is not needed.

I respectfully urge you to reconsider the implications of HB0934 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding HB0934. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Michaela Kotishion

NH SB0830.pdf

Uploaded by: Nicole Hamilton

Position: UNF

Nicole Hamilton
1429 Barrett Road
Baltimore, Maryland 21207
Nicole817h@gmail.com
443-333-0514
February 24, 2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. **Limited training and qualifications:** Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,



Nicole Hamilton

NEP SB0830 Klausmeier Letter.pdf

Uploaded by: Nivia Prescod

Position: UNF

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Sincerely,

N. Prescod

SB0830 Klausmeier Letter.pdf

Uploaded by: Richard Roys

Position: UNF

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine
Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. My biggest concern as a licensed Radiographer of 8 years is that there isn't a possibility that a mere 50 hours of training will prepare you to become an x-ray technologist. It took my coworkers and I 2 years of hard, intense training. Not only will this put patients at severe risk of increased doses of radiation due to incompetent technologists, this will also affect our work flow in the hospitals. We will essentially have to work beside untrained technologists, it will cause increased stress, and a decline in staffing in Radiology departments.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Opposition of SB 0830.pdf

Uploaded by: Sarah Morgan

Position: UNF

Sarah Morgan
Radiography Program Student

To whom it may concern,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

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less-trained workers will be able to perform about 50% of the studies that are currently designated to be performed by a licensed radiographer only. Outpatient and urgent care centers will never hire a full radiographer if they can hire a Limited Licensed Radiologic Technologist. Even hospitals will hire less radiographers forever more. Job opportunities for radiographers will decrease and will never recover after the shortage is over. Radiography programs will never be at full capacity as once was. This will decimate the radiography profession in Maryland, a profession that takes three years of comprehensive training and an associate degree, and patients will be at harm. Do not cheapen our profession, especially when it is not needed.

I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Sarah Morgan

HB0934 Delegates Letter (1).pdf

Uploaded by: Shannon O'Dair

Position: UNF

Delegates Joseline A. Pena-Melnyk, Bonnie Cullison, Tiffany T. Alston, Heather Bagnall, Harry Bhandari, Brian Chisholm, Pam Lanman Guzzone, Terri L. Hill, Steve Johnson, Anne R. Kaiser, Kenneth Kerr, Nicholas R. Kipke, Robbyn Lewis, Lesley J. Lopez, Ashanti Martinez, Matthew Morgan, Teresa E. Reilly, Samuel I. Rosenberg, Kathy Szeliga, Deni Taveras, Jennifer White Holland, Jamila J. Woods,

House Office Buildings
Annapolis, Maryland 21401

Re: Opposition to HB0934 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Delegates on the Health and Government Operations Committee,

First and foremost, I would like to introduce myself. My name is Michaela Kotishion and I am a Radiologic Technologist that is licensed in Maryland and a graduate of the Community College of Baltimore County X-ray program. I have been a practicing radiographer for 3 years. My work history includes hospitals such as Medstar Franklin Square Medical Center, University of Maryland Midtown Campus, and Lifebridge Sinai hospital. I am employed currently at the Center of Advanced Orthopedics. This career path has provided me with a passion that extends further than my job title that was not obtainable without a program that was 2 years long, 5 days a week, no winter or semester breaks. I urge you to reconsider passing this bill for the safety of our community. The education that radiographers receive is not something that can be taught in one year, the bill calls for a mediocre 50 hours to administer radiation to our community.

I am writing to strongly oppose HB0934, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. Limited training and qualifications: Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.

2. Addressing shortages through alternative means: Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. Efforts such as expanding clinical rotation experiences and increasing admission numbers to radiography programs demonstrate proactive steps towards alleviating workforce shortages without compromising patient safety. The introduction of Limited Licensed Radiologic Technologists does not alleviate the job shortage, but in fact, causes greater shortages in hospital radiographer positions, particularly in the advanced imaging departments of cat scan, MRI, mammography, and interventional and cardiology catheterization labs, which are in dire need of staff.
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I respectfully urge you to reconsider the implications of HB0934 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding HB0934. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Radiography Student

Opposition letter.pdf

Uploaded by: Shatera Walters

Position: UNF

1971 Laurel Oak Drive
Bel Air, Maryland 21015
Shatera.walters@gmail.com
443-528-2013
February 18, 2024

Senator Katherine Klausmeier
123 James Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senator Klausmeier,

I am writing to strongly oppose SB0830, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I believe that this proposed legislation presents significant risks and challenges that demand immediate attention.

The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about public safety and the integrity of our healthcare system. I would like to highlight several reasons why this bill should not be advanced:

1. **Limited training and qualifications:** Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers, raising concerns about their ability to safely administer ionizing radiation to patients. Given the increasing prevalence of radiation-based medical procedures, it is imperative that we prioritize the expertise and proficiency of healthcare professionals in delivering such treatments.
2. **Addressing shortages through alternative means:** Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. Efforts such as expanding clinical rotation experiences and increasing admission numbers to radiography programs demonstrate proactive steps towards alleviating workforce shortages without compromising patient safety.
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I respectfully urge you to reconsider the implications of SB0830 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

Shatera Walters

SB0830 Klausmeier Letter.pdf

Uploaded by: Stacey O'Brien

Position: UNF

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Thank you for considering my concerns regarding SB0830. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,

A handwritten signature in black ink, appearing to read 'Stacey O'Brien', with a long horizontal flourish extending to the right.

Stacey O'Brien, MEHP, R(TR)

Copy of SB0830 Klausmeier Letter.pdf

Uploaded by: Susan Morgan

Position: UNF

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Sincerely,

Susan Morgan B.S , RT(R)M, MR

Copy of SB0830 Klausmeier Letter.pdf

Uploaded by: Sydney Dowling

Position: UNF

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Sincerely,

Sydney Dowling, RT(R)

SB0830.pdf

Uploaded by: Sydney Lewis

Position: UNF

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Sincerely,

Sydney Lewis

Testimony .pdf

Uploaded by: Taylor Diehl

Position: UNF

9604 Haven Farm Rd
Perry Hall, MD, 21128
taylor.diehl97@gmail.com
4439070324
2/18/2024

I am writing to strongly oppose SB0830, Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist.

As a concerned resident and healthcare employee in Maryland, I believe this proposed legislation will introduce safety concerns and challenges for both patients and radiologic technologists.

With only acquiring 50 hours of clinical and didactic training, patients will receive inadequate and non-diagnostic imaging. Thus, having the technologist repeat the imaging and increasing the patient's exposure to radiation. In addition to this concern, patient safety is at risk due to only having fifty hours of training, such as patient care and operating X-ray equipment. Licensed technologists must go through courses for radiation protection to understand patient radiation dosage depending upon multiple factors such as age and body habitus. This puts our younger population at risk for higher rates of cancer due to the inadequate schooling and training. Students of the radiography programs undergo 75 hours of radiation protection; whereas, the limited licensed tech is required to only have 15 hours.

With hiring limited technologists at a lower pay rate, outpatient centers, such as orthopedic offices and urgent cares, will be less likely to hire registered and licensed technologists at the average full time hourly rate. This will result in mass layoffs at these companies or pay cuts in current full time licensed techs. SB0830 will limit the jobs available for licensed technologists as well as lower the payscale and degrade this profession.

With the fifty hour training for limited licensed technologists, this can result in multiple schools eradicating the radiography programs. These programs are crucial in this profession by producing well trained technologists. The programs are designed to have at least 1600 hours of clinicals and 54 competencies within two years. Those that are

interested in the program will try to take advantage of the 50 hour training rather than extensive learning to become an adequate technologist which will lead to a decrease in students applying to the programs. This legislation will not help the radiologic technologist shortage but will hinder our profession.

Thank you for considering my concerns towards SB0830. I trust that you will uphold the healthcare standards and patient safety. I urge you to reconsider this legislation and withdraw support for this. Do not degrade our profession or put the general population at risk.

Sincerely,
Taylor Diehl RT R

testimony SB0830.pdf

Uploaded by: Tina Diehl

Position: UNF

29 Craig Court
Conowingo, MD, 21918
tinrendie@zoominternet.net
443-742-0709
2/26/24

Senators Pamela Beidle, Arthur Ellis, Dawn Gile, Antonio Hayes, Stephen S. Hershey, Jr., Benjamin F. Kramer, Clarence K. Lam, Johnny Mautz, Justin Ready, and Alonzo T. Washington

Senate Office Buildings
Annapolis, Maryland 21401

Re: Opposition to SB0830 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Senators on the Finance Committee,

I am writing to strongly oppose SB0830, Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist.

As a concerned resident in Maryland, I believe this proposed legislation will introduce safety concerns and challenges for both patients and radiologic technologists.

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Thank you for considering my concerns towards SB0830. I trust that you will uphold the healthcare standards and patient safety. I urge you to reconsider this legislation and withdraw support for this. Do not degrade this profession or put the general population at risk.

Sincerely,
Tina Diehl